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ANS ACTIONS the Canadian Dental Association

DÉLIBÉRATIONS de L'association dentaire canadienne



INTERIM AND ANNUAL MEETINGS
BOARD OF GOVERNORS
MARCH 19 - 20 AND SEPTEMBER 24-25

ASSEMBLÉES INTÉrimAIRE ANNUELLE
DU CONSEIL DES GOUVERNEURS
LES 19-20 MARS ET LES 24-25 SEPTEMBRE

1983



Enclosed is your copy of the 1983 Transactions of the Board of Governors of the Canadian Dental Association. This publication contains a record of the March 4-5th Interim meeting in Ottawa and the September 23-24th Annual meeting, held in Vancouver.

The Transactions are published as an internal document and it is forwarded to you because of your participation and interest in the deliberations of the national association.

A handwritten signature in cursive script, appearing to read "Robert Deane". The signature is fluid and extends across the width of the page.

/pc



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

December 12, 1983

TO: All Holders of the CDA Directory of Officials

FROM: Hubert Drouin, Executive Director

SUBJECT: 1983 Transactions of the Board of Governors



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INTERIM
MEETING
BOARD OF GOVERNORS
CANADIAN DENTAL ASSOCIATION

OTTAWA, ONTARIO

March 4-5

1983

PRIERE DE FAIRE SUIVRE

Ce cahier constitue un dossier des affaires traitées aux assemblées intérimaire et annuelle du Conseil d'administration de l'Association dentaire canadienne, à Ottawa (Ontario), les 4 et 5 mai et les 23 et 25 septembre 1983 respectivement.

Tous les membres de l'Association dentaire canadienne sont invités à assister et à participer aux assemblées du Conseil d'administration.

Pendant les assemblées, les rapports des conseils, des divisions, etc. sont exposés publiquement. Le président peut accorder le droit de parole à tout membre sur tout sujet, mais seuls les membres du Conseil d'administration ont le droit de vote.

Les parties en italique tant dans le corps qu'à la fin des rapports présentes par les conseils ou les divisions représentent les commentaires et les décisions du Conseil d'administration.

Les PROCES-VERBAUX DE L'ADC ont pour but de fournir aux membres un dossier sur les politiques et les décisions du Conseil d'administration ainsi que sur le travail effectué par les conseils et les divisions de l'association.

FORWARD

This book provides a record of the business transacted at the Interim and Annual Meetings of the Board of Governors of the Canadian Dental Association, at Ottawa, Ontario on March 4-5, and September 23-24, 1983 respectively.

All members of the Canadian Dental Association are welcome to attend and to participate in the meetings of the Board of Governors.

During the sessions, reports of Councils and Sections, etc., are brought to open sessions of the Board, and, although the Chairman may permit any member to speak on any issue, only Board members may vote.

Words appearing in italics both within the body and at the end of the Council or Section Reports constitute the comments and actions of the Board of Governors.

The purpose of the C.D.A. TRANSACTIONS is to provide members with a record of the policies and decisions of the Board of Governors and the work of the Association's Councils and Sections.

OBSERVERS

CDA Staff:

D.V. Chatwin, Director of Accreditation	J. Scrimger, Business Manager
D. Goodwin, Director of Communications	L. Teteruck, Director of Education
C. Metcalfe, Editor	

NAME

REPRESENTING

J.F. Begin	Cdn. Forces Dental Services
I.C. Bennett	Cdn. Academy of Paedodontics
L. Berry	Cdn. Dental Hygienists' Association
M. Boucher	Ordre des dentistes du Québec
E. Busvek	Council on Student Affairs
K.D. Butler	Cdn. Dental Services Plans Inc.
M.D. Charendoff	Cdn. Dental Services Plans Inc.
D.V. Chaytor	The Assoc. of Prosthodontists of Canada
C. Covit	Ordre des dentistes du Québec
K. Croft	College of Dental Surgeons of B.C.
F. Dawes	National Dental Examining Board
J.M. Dillon	Manitoba Dental Association
A.R. Elgeneidy	Cdn. Academy of Oral Pathology
R. Filion	Royal College of Dental Surgeons of Ontario
J.C. Gillies	Ontario Dental Association
T.J. Gushue	Newfoundland Dental Society
K.C. Hickling	Department of Veterans Affairs
R.D. Kinniburgh	Alberta Dental Association
I. Kleysteuber	Canadian Fund for Dental Education
G. Kravis	National Dental Examining Board
P.Y. Lamarche	Ordre des dentistes du Québec
N.J. Layton	National Dental Examining Board
G. MacDonald	Newfoundland Dental Association
J.H.P. Main	Royal College of Dentists of Canada
B.P. Martinello	Alberta Dental Association
R.H. McIntyre	Manitoba Dental Association
R.L. Moran	Cdn. Dental Services Plans Inc.
D. Pamenter	Nova Scotia Dental Association
M. Pelletier	Cdn. Dental Hygienists' Association
D.K. Peters	Cdn. Fund for Dental Education
K. Pownall	Royal College of Dental Surgeons of Ontario
A. Schwartz	Association of Canadian Faculties of Dentistry
G.G. Turner	Nova Scotia Dental Association
J.E. White	Saskatchewan Dental Surgeons
C. Worobey	Canadian Dental Hygienists' Association

CANADIAN DENTAL ASSOCIATION

BOARD OF GOVERNORS

OFFICERS & OFFICIALS

Chairman of the Board of Governors N.A. Mancini

EXECUTIVE COUNCIL

W.R. Thompson, President	P.R. Crawford	T.E. Ramage
R.N. Hicks, President-Elect	B.W. Holmes	J. Robertson
D.E. Williams, Past President	J. Laporte	D.L. Thompson

Executive Director: H.E. Drouin

BOARD OF GOVERNORS

ALBERTA:	NEWFOUNDLAND	PRINCE EDWARD ISLAND:
E.F. Allison	G. Anthony	J. Robertson
D.L. Thompson		
BRITISH COLUMBIA:	NOVA SCOTIA:	QUEBEC:
M.J.R. Leitch	J. Christie	J. Laporte
R.J. Markey		I. Margolese
T.E. Ramage	ONTARIO:	
J.G. Silver	B.W. Holmes	SASKATCHEWAN:
	K.L. Roach	J.W. Niedermayer
MANITOBA:	R.R. Schiewe	
P.R. Crawford	D.B. Smith	CDN FORCES DENTAL SERVICES:
	E.G. Sonley	J.N. Wright
NEW BRUNSWICK		STUDENT REPRESENTATIVE:
R.A. Turcotte		D. McLeod
HEALTH & WELFARE:	VETERANS AFFAIRS:	
W.R. Bedford	J.C. Tsafaroff	

Recording Secretary: Mrs. P. Cunningham

COUNCIL CHAIRMEN

R.Y. Barolet (Dental Materials & Devices)	A. Thivierge (Student Affairs)
G.R. Thordarson (Ethics)	Y. Kamachi (Information Services)
J.E. Durran (Insurance & Investments)	D. McDougall (Constitution & By-laws)
M. Gornitsky (Hospital Services)	K.C. Bentley (Education)
H.W. Horsman (Health Care)	D.E. Williams (Nominations)

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MARCH 1983

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EXECUTIVE

REPORT OF THE EXECUTIVE COUNCIL TO THE 1983 INTERIM BOARD OF GOVERNORS

Members: Dr. W.R. Thompson, Ottawa, Chairman
Dr. P.R. Crawford, Winnipeg
Dr. R.N. Hicks, Vancouver
Dr. B.W. Holmes, Kenora
Dr. J. Laporte, Quebec
Dr. T.E. Ramage, Vancouver
Dr. J. Robertson, Summerside
Dr. D.L. Thompson, Calgary
Dr. D.E. Williams, Moncton

Council Meetings

Since the last Board of Governors meeting in September, 1982, the Executive Council has met on two occasions - November 19-20, 1982 and January 28-29, 1983.

Business Requiring Board Action

Audited Financial Statements - Canadian Dental Association

The Audited Financial Statements for the Canadian Dental Association were reviewed and explanatory notes are appended for information.

APPENDIX A

RESOLVED:

- 83.1 *THAT the Audited Financial Statements for the Canadian Dental Association for the fiscal year ending December 31, 1982 be adopted.*

Adopted

Five-Year Financial Comparison

A five-year comparison covering the years 1978 - 1982 is appended for information.

APPENDIX B

Audited Financial Statements - Canadian Dental Research Foundation

Following a review of the Audited Financial Statements for the Canadian Dental Research Foundation, it was

APPENDIX C

RESOLVED:

- 83.2 *THAT the Audited Financial Statements for the Canadian Dental Association for the fiscal year ending December 31, 1982 be adopted.*

Adopted

Business Requiring Board Action - continuedRequests for Funding - Other Dental Group Meetings

Executive Council felt that it is necessary to develop Guidelines regarding requests for funding from other dental groups. From time to time, decisions must be made in this regard and Council agreed that international meetings to be held in Canada must be considered. Support for other meetings, due to financial considerations, would be limited to letters of encouragement.

RESOLVED:

83.3

THAT the following terms of reference be approved for CDA Financial Support of International Dental Meetings in Canada:

- 1. Application from Canadian dental groups or associations sponsoring international scientific meetings will be accepted by the CDA via the office of the Executive Director.*
- 2. Information supplied to the CDA will include the nature and content of the international meeting and the estimated number of participants and from which countries they come.*
- 3. The amount of financial support will be in the form of a direct grant to the sponsoring organization to be used toward the meeting costs and the amount of the grant will be nominal in nature.*
- 4. Appropriate recognition of CDA's financial support will be displayed to the meeting participants.*
- 5. Approval of the applications will be the responsibility of the Executive Council.*

Adopted

FDI Delegates

RESOLVED:

83.4

THAT the CDA delegates to the 1983 FDI Congress be the President and the National Treasurer.

THAT Drs. G. Beagrie and C. Chicoine be requested to act as alternate delegates to the 1983 FDI Congress.

Adopted

Business Requiring Board Action - continuedManagement Committee - Terms of Reference

The terms of reference of the Management Committee were reviewed.

RESOLVED:

83.5

THAT the Terms of Reference for the Management Committee be accepted as follows:

There shall be a Management Committee, composed of the President, the Immediate Past President and the President-Elect, who shall be the Chairman:

- a) to serve as custodian of all monies, securities and deeds belonging to the Association;*
- b) to present an annual report to the Board of Governors including the Auditor's Report for the preceding year and the budget that has been proposed for the next succeeding fiscal year;*
- c) to perform such other duties that the Management Committee feels is necessary to assist the Executive Council;*
- d) the Chairman of the Management Committee shall report the Committee's activities to each meeting of the Executive Council;*
- e) to perform such other duties as may be designated by the Executive Council or these By-laws;*
- f) to keep a minute book;*

and FURTHER THAT the Terms of Reference for Management Committee be referred to the Council on Constitution and By-laws for incorporation into that document.

Adopted

CDA - RRSP

The Ontario Securities Commission has refused CDSPI's request for exemption from filing a formal prospectus and performing weekly valuations of all four funds which make up the RRSP basket. This ruling applies to the funds operated by the teachers and medical doctors as well.

APPENDIX D

Business Requiring Board Action - continuedCDA - RRSP

Since the deadline for complying with this order appears to be April 29, 1983, an attempt was made to join with the teachers and medical doctors for the purpose of submitting a common request for an extension of sixty days. This time is necessary for CDSPI and CDA to gain additional time to implement whatever option is chosen. These options are:

- a) Comply with the Ontario Securities Commission ruling re prospectus and weekly valuations.
- b) Transfer the funds to an insurance company where the rules are different.
- c) Discontinue the operation of the funds.

The use of an insurance company as the alternative for the operation of the Plan reduces considerably the ongoing operating costs of the Program and under current regulations and laws, no prospectus would be required.

Although not a legal requirement, audited financial statements will be part of the Annual Report of the program.

In light of the preceding information, the Executive Council carefully considered the alternatives which had been presented by CDSPI and has reached the following decisions:

- a) That the CDA RRSP be transferred to the Imperial Life Assurance Company of Canada;
- b) That audited financial statements of the Registered Retirement Savings Plan become part of the Annual Report of the Plan for the fiscal year ended February 29, 1984;
- c) That the solicitors of CDSPI work with the Imperial Life Assurance Company of Canada, in the drawing up of all legal documents relating to the legal and smooth transfer of the Plan from Royal Trust to Imperial Life;
- d) That CDSPI in conjunction with Imperial Life and their solicitors proceed to develop the necessary promotional and announcement material to be sent to each current participant in the program in order to facilitate the necessary legal steps for the transfer of the Program.

It is pointed out that individual plan holders have the right at any time to remove their funds.

Business Requiring Board Action - continuedCDA - RRSP

RESOLVED:

- 83.6 *THAT the Board of Governors ratify the actions taken at the January 28-29th meeting of the Executive Council, to transfer the CDA RRSP from Royal Trust to Imperial Life.*

Adopted

Matters for Information - Executive Committee Reports

The following items are representative of the numerous activities of the Executive Council since the last Board of Governors meeting.

Editorial Board

A report of the Editorial Board is appended for information.

APPENDIX E

Convention Committee1983 Annual Convention - Vancouver

Plans for the 1983 CDA Annual Convention in Vancouver are being finalized and registration forms and programs will be forwarded by the end of April. It is noted with pleasure that the exhibit space has already been completely filled.

1984 Annual Convention - Montreal

Plans are progressing well with the Order of Dentists of Quebec, under the chairmanship of Dr. Michel Jahjah. It is hoped that the new Convention Centre will be the site of this event.

1985 Annual Convention - Ottawa

The 1985 CDA Convention Chairman has recently been appointed and is Dr. Donald O'Connor of Ottawa.

1986 Annual Convention - Winnipeg

The Executive notes with pleasure the acceptance of the Manitoba Dental Association to host the 1986 Annual Convention in Winnipeg.

Items for InformationMembership Committee

The report of the Membership Committee is appended for information and statistics have been updated to February 25, 1983.

APPENDIX F

Life members were accepted by the Executive Council and are listed in the appendix.

Certificates of Merit

Executive Council approved Certificates of Merit for the following persons who have served as members of councils, council chairmen or governors. The Association has expressed its deep appreciation for the efforts they have made on its behalf.

Governors

Dr. R.D. Kinniburgh	- Alberta	Dr. R. Hurley	- Student
Dr. R.D. Sexton	- Newfoundland	Dr. W. Leskiw	- Student ('81)

Chairmen

Dr. J.W. Bradey (Ethics)	Dr. P. Judd (Student Affairs)
Dr. D. Baird (Student Affairs '80)	Dr. D.J. Yeo (Education)
Dr. G.C. Stirling (1982 CDA/ODA Convention)	

Council Members

Col. J.F. Begin (Health Care)	Dr. M. Carvonis (Information Services)
Dr. E. Freidin (Health Care)	Dr. P.Y. Lamarche (Ethics)
Dr. T.M. Dobbs (Health Care)	Dr. A. Osborn (Education)
Dr. M.J. Crompton (Nominations)	Dr. G.H. Peacock (Education)
Dr. D. Gau (Dental Materials)	Dr. E.J. Rajczak (Education)
Dr. D. Kapusianyk (Student Affairs)	

Committee Members

Dr. D.W. Banting (Product Acceptance)

Taxation Committee

Recent correspondence regarding Professional Management Companies is appended for information. This pertains to recent government audits of dental practices and 3111 C-139.

APPENDIX G

Items for Information

The following is a list of the meetings attended by the Executive since the last Board meeting in September, 1982:

September 28 - McGill University - Welcome to the Profession
October 11-18 - Federation Dentaire Internationale - Vienna, Austria
October 19 - Toronto All Societies Meeting - Toronto
October 29-30 - Management Committee - Ottawa
November 5-9 - American Dental Association Convention, Las Vegas, Nevada
November 18 - Peer Review/Quality Assurance Conference - Ottawa
November 18 - Meeting with Senior Dental Consultant, Health & Welfare
December 1 - Fed./Prov. Meeting of the Advisory Committee on
Health Manpower - Ottawa
December 4-5 - Ontario Dental Association Board of Governors - Toronto
December 6 - Academy of Dentistry - Toronto
December 10 - Dental Licensing Bodies Meeting - Montreal
January 11 - Greater Dental Societies of Montreal - Montreal
- Meeting with Dr. C. Chicoine (QDSA)
January 20 - Meeting with Senior Dental Consultant - Health & Welfare
January 21-22 - Management Committee - Ottawa

Quality Assurance Conference

Executive Council reports on the success of the Quality Assurance Conference which was held in Ottawa on November 18, 1982. This was arranged at the request of the provincial associations and many contacts for further information on this subject were established with the American Dental Association.

A Quality Assurance Conference in Chicago, sponsored by the American Fund for Dental Health, will be held in April and registration forms will be distributed to those who participated in the CDA conference.

Manpower Supply Study

Upon completion of the R.K. House Manpower Supply Study, a presentation was made to the Federal/Provincial Advisory Committee on Health Manpower. Prior to this activity, reports were mailed to Corporate Members, Governors Specialty Sections and Affiliated Societies for information.

The report in final form is published in the February, 1983 issue of the CDA Journal. It is noted that a request has been filled for one of the corporate members to use the R.K. House model for a simulation.

Items for InformationAd Hoc Committee on Hospital Services

At the direction of the September, 1982 Board of Governors meeting, an Ad Hoc Committee on Hospital Services has been formed and is comprised of the following members:

Dr. D.E. Williams, Chairman
Dr. P.R. Crawford
Dr. B.W. Holmes
Mr. H. Drouin

Three meetings have been held to date; however because of the complex subject matter, the Committee requires more time for study and recommendations will be brought to the September, 1983 Board of Governors meeting.

Committee on Salaried Dentists

The Committee on Salaried Dentists has been formed and members are as follows:

Brig.-Gen. J.N. Wright, CFDS, Chairman
Dr. R.K. Ryan, Public Health Dentistry, Ministry of Health (Ontario)
Dr. J.W. Niedermayer, Private Practitioner
Dean A. Schwartz, University of Manitoba, Institutional Representative

A meeting is scheduled for March 3, 1983 in Ottawa.

Building Contingency Reserve

Executive Council considered the need for a Building Contingency Reserve which would be established to handle major repairs and/or alterations to the building and property at 1815 Alta Vista Drive. Terms of reference were developed as appended.

APPENDIX H

FDI Congresses

The QDSA has suggested that CDA approve the hosting of a future FDI Congress. Consequently terms of reference for FDI Congresses were reviewed by the Executive Council. Because this is an extremely large document, data relating to costs has been prepared. The host country is financially responsible for any losses incurred with the international congress.

APPENDIX I

Items for InformationResearch Funding - ACFD

The Association of Canadian Faculties of Dentistry formed an Ad Hoc Committee in 1982 to explore the feasibility of increasing dental research funding. CDA is represented on this Committee by Dr. Ralph Barolet who is Chairman, Council on Dental Materials and Devices. A third meeting was held at CDA headquarters on February 17, 1983, funded by Health & Welfare.

CDSPI - Succession of Management Committee

A response from CDSPI regarding a formula for regular succession of membership on its Management Committee was reviewed. This topic was followed up from the September, 1982 Board of Governors meeting.

It has been requested that this matter be deferred to the September, 1983 Board of Governors meeting, in order that the CDSPI Chairman, Dr. R.L. Rasmussen can be in attendance to respond to any questions in this regard.

Advisory Board Representation from CDA

The pros and cons of having CDA representation on the Advisory Board of the Dental Therapy School at Prince Albert were considered by Executive Council. In the light of the fact that strong opposition exists within the profession regarding the Health and Welfare School of Dental Therapy in Prince Albert, Saskatchewan, Council decided that no further action should be taken regarding a CDA position on the School's Policy Advisory Committee.

American Dental Association - Specialty Groups

Documentation was received from the ADA regarding possible changes within the Specialty Groups of their Association. CDA was requested by the RCD(C) to respond to this matter on the College's behalf and this information is appended.

APPENDIX J

Media Workshops

The success of the Media Workshops arranged by the CDA are still being evidenced in the others held in Manitoba and more recently in New Brunswick. They have provided excellent vehicles to provide capability to deal with the news media competently.

Items for InformationExpense Accounts

The Executive Council, at the request of a number of Council and Committee members, has reviewed the allocation of meal allowances and agrees that the present amount is inadequate.

It was decided that the maximum allowance for meals per day would be increased from \$45.00 to \$50.00 and that this amount would be allocated as follows:

Breakfast	- \$7.00
Lunch	- \$9.00
Dinner	- \$34.00

Government RelationsHealth & Welfare - CDA Assistance and Evaluation of Dental Treatment Program for Native and Inuit People in Canada

Executive Council has considered proposals submitted by Health and Welfare that have identified two primary areas of assistance that CDA could provide in the evaluation of the responsibilities of the Medical Services Branch, Health and Welfare.

Executive Council has requested the Council on Health Care to appoint a subcommittee to meet with the Senior Dental Consultant to consider the feasibility of the requests and recommend the following:

- a) whether to accept or reject the proposal and reasons for the specific decision;
- b) methods of implementing a favorable decision for the proposal, including terms of reference for the initial study committee.

National Health Strategies Document

The Federal Government document on National Health Strategies was circulated to governors and corporate members for comment. Replies received varied greatly from those containing definite recommendations to two suggestions that this document be ignored.

In the view of the Executive Council, a response was necessary to note that dentistry should not have been excluded and to point out that dental disease does indeed contribute to national health. This reply is appended.

Items for InformationGovernment RelationsHealth & Welfare - Standards & Guidelines in Dental Practice

In the light of the endeavours of recent working groups of Health and Welfare, CDA was requested to review the document "Standards & Guidelines in Dental Practice". This was carried out by the Council on Health Care and after the critique and concerns were considered, Executive Council accepted the working paper in principle with certain reservations. These were expressed to the appropriate authorities at Health and Welfare, and CDA also advised that the Association would be interested in participating actively in any future working groups that may be convened.

Other recommendations offered were as follows:

- a) That the creation, development and participation in future working groups related to dentistry be a cooperative venture between Health and Welfare and the CDA and be so acknowledged and recognized; and
- b) That the composition of each working group should be representative of a broad range of people active in the area being studied and that the CDA be consulted for their comments prior to the composition of the working group being finalized.

Health & Welfare have expressed appreciation of CDA's input and advised that they are now in a position, through recently established communication links, to more intimately involve the Canadian Dental Association and hence to ensure continued mutual cooperation.

Council Reports

The Executive Council has reviewed Council reports as appended and other matters which require Board action follow therein.

Respectfully submitted

W.R. Thompson, Chairman
Executive Council

APPENDIX A

CANADIAN DENTAL ASSOCIATION
FINANCIAL STATEMENTS
DECEMBER 31, 1982

McCAY, DUFF & COMPANY

CHARTERED ACCOUNTANTS

JOHN W. FRANKLIN, C.A.
THOMAS W. HOWARTH, C.A.
BRYAN E. SULLIVAN, C.A.
ALBERT G. MONSOUR, B ADMIN., C.A.
BLAIR E. DAVIDSON, B COMM., C.A.

CONSULTANT - ELDREN E. MCCONNELL, C.A.

330 McLEOD ST.
OTTAWA, ONT.
K2P 2C5
PHONE 238-2387

AUDITORS' REPORT

To the Members,
Canadian Dental Association.

We have examined the balance sheet of the Canadian Dental Association as at December 31, 1982 and the statements of members' equity, revenue and expenses, revenue and expenses and equity for the Library Trust Fund and the Grieve Memorial Lectureship Fund and changes in financial position for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the Association as at December 31, 1982 and the results of its operations and the changes in its financial position for the year then ended in accordance with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

McCay Duff & Co.

Chartered Accountants.

Ottawa, Ontario,
January 12, 1983.

CANADIAN DENTAL ASSOCIATION

BALANCE SHEET

AS AT DECEMBER 31, 1982

	ASSETS	1982	1981
CURRENT			
Cash		\$1,062,441	\$ 545,764
Deposit certificate		-	200,000
Accounts receivable		61,399	66,591
Inventory (note 1)		40,202	45,169
Prepaid expenses		36,611	25,025
		<u>1,200,653</u>	<u>882,549</u>
FIXED (notes 1 and 2)		<u>1,353,140</u>	<u>1,332,289</u>
		<u>2,553,793</u>	<u>2,214,838</u>
	TRUST ASSETS		
Cash		58,495	58,380
Bonds and deposit certificate		5,343	5,343
Library books and furniture (at nominal value)		<u>1</u>	<u>1</u>
		<u>63,839</u>	<u>63,724</u>
		<u>\$2,617,632</u>	<u>\$2,278,562</u>
	LIABILITIES		
CURRENT			
Accounts payable		\$ 70,839	\$ 50,420
Deferred revenue		542,600	588,409
Current portion of long term debt		<u>6,000</u>	<u>6,000</u>
		<u>619,439</u>	<u>644,829</u>
LONG-TERM DEBT (note 3)		430,387	448,094
	MEMBERS' EQUITY		
SURPLUS		587,214	243,720
EQUITY IN FIXED ASSETS		<u>916,753</u>	<u>878,195</u>
		<u>1,503,967</u>	<u>1,121,915</u>
		<u>2,553,793</u>	<u>2,214,838</u>
	TRUST LIABILITIES AND EQUITY		
Accounts payable		333	500
Library Trust Fund		57,373	57,455
The Grieve Memorial Lectureship Fund		<u>6,133</u>	<u>5,769</u>
		<u>63,839</u>	<u>63,724</u>
		<u>\$2,617,632</u>	<u>\$2,278,562</u>
Approved on behalf of the Board:			

President_____
Executive Director

CANADIAN DENTAL ASSOCIATION
STATEMENT OF MEMBERS' EQUITY
FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>	<u>1981</u>
SURPLUS		
BALANCE - BEGINNING OF YEAR	\$243,720	(\$255,668)
Excess of revenue over expenses for the year	382,052	461,953
Transfer from (to) equity in fixed assets	(38,558)	37,435
BALANCE - END OF YEAR	<u>\$587,214</u>	<u>\$243,720</u>
EQUITY IN FIXED ASSETS		
BALANCE - BEGINNING OF YEAR	\$878,195	\$915,630
Transfer from (to) surplus	<u>38,558</u>	(37,435)
BALANCE - END OF YEAR	<u>\$916,753</u>	<u>\$878,195</u>

CANADIAN DENTAL ASSOCIATION
STATEMENT OF REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	Budget	Actual	Actual
REVENUE			
Fees (schedule A)	\$1,758,755	\$1,817,040	\$1,781,072
Grants	36,500	37,669	45,185
Journal (schedule C)	408,500	359,075	315,312
Publications	35,000	56,911	42,331
Interest	30,000	148,881	104,902
Rental	106,962	110,556	112,383
Other (schedule B)	21,000	28,178	61,288
	2,396,717	2,558,310	2,462,473
EXPENSES			
Honoraria and per diem	156,625	171,984	168,998
Salaries and benefits	514,800	515,940	458,949
General and administration (schedule D)	280,300	279,083	296,614
Conferences	29,500	32,933	48,178
Journal (schedule C)	480,600	409,805	376,993
Other publications (schedule E)	63,000	68,239	51,813
Institutional advertising	15,000	1,717	-
Travel and meetings (schedule F)	257,400	292,661	239,094
Unbudgeted Projects (schedule F)	-	34,984	51,688
Property management	256,941	234,833	225,697
Dental Health Month	30,000	30,649	29,028
Accreditation surveys	30,600	27,588	15,009
Dental Aptitude Program	41,000	45,848	38,459
Membership campaign	25,000	13,193	-
Student affairs	7,000	15,314	-
F.D.I. administration	6,000	1,487	-
	2,193,766	2,176,258	2,000,520
EXCESS OF REVENUE OVER EXPENSES FOR THE YEAR	\$ 202,951	\$ 382,052	\$ 461,953

CANADIAN DENTAL ASSOCIATION

LIBRARY TRUST FUND

STATEMENT OF REVENUE AND EXPENSES AND EQUITY

FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>	<u>1981</u>
REVENUE		
Interest	\$ 8,176	\$ 9,648
EXPENSES		
Binding	55	67
Books and furniture	1,216	4,965
Medline terminal	2,488	-
Subscriptions	2,446	524
Supplies and services	<u>2,053</u>	<u>3,303</u>
	<u>8,258</u>	<u>8,859</u>
EXCESS OF REVENUE OVER EXPENSES (EXPENSES OVER REVENUE FOR THE YEAR	(82)	789
Equity - beginning of year	<u>57,455</u>	<u>56,666</u>
EQUITY - END OF YEAR	<u>\$57,373</u>	<u>\$57,455</u>

CANADIAN DENTAL ASSOCIATION
 THE GRIEVE MEMORIAL LECTURESHIP FUND
 STATEMENT OF REVENUE AND EXPENSE AND EQUITY
 FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>	<u>1981</u>
REVENUE		
Interest	\$ 364	\$ 399
EXPENSE		
Grant to the Orthodontic section of the Canadian Dental Association	<u>-</u>	<u>700</u>
EXCESS OF REVENUE OVER EXPENSE (EXPENSE OVER REVENUE) FOR THE YEAR	364	(301)
Equity - beginning of year	<u>5,769</u>	<u>6,070</u>
EQUITY - END OF YEAR	<u>\$6,133</u>	<u>\$5,769</u>

CANADIAN DENTAL ASSOCIATION
STATEMENT OF CHANGES IN FINANCIAL POSITION
FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>	<u>1981</u>
SOURCE OF FUNDS		
Operations		
Excess of revenue over expenses for the year	\$382,052	\$461,953
Item not requiring working capital - depreciation	<u>57,343</u>	<u>57,296</u>
	439,395	519,249
APPLICATION OF FUNDS		
Purchase of fixed assets	78,194	14,226
Reduction of long term debt	<u>17,707</u>	<u>5,635</u>
	<u>95,901</u>	<u>19,861</u>
INCREASE IN WORKING CAPITAL	343,494	499,388
Working capital (deficiency) - beginning of year	<u>237,720</u>	(<u>261,668</u>)
WORKING CAPITAL - END OF YEAR	<u>\$581,214</u>	<u>\$237,720</u>

CANADIAN DENTAL ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 1982

1. SIGNIFICANT ACCOUNTING POLICIES

(a) Inventory

Inventory is stated at the lower of cost and net realizable value.

(b) Depreciation

Furniture and equipment purchased subsequent to January 1, 1979 are expensed when acquired.

Depreciation is provided on the straight line basis as follows:

Building	- 40 years
Building improvements	- 5 years
Furniture and equipment	- 10 years
Data processing equipment	- 5 years

(c) Revenue Recognition

Membership fees and subscriptions to the Journal are recognized as revenue in the year to which they apply. Grants are recognized as revenue when received.

2. FIXED ASSETS

	1982			1981
	Cost	Accumulated Depreciation	Net	Net
Land	\$ 82,915	\$ -	\$ 82,915	\$ 82,915
Building	1,376,435	237,544	1,138,891	1,173,301
Building improvements	72,010	34,475	37,535	42,648
Furniture and equipment	88,309	62,461	25,848	33,425
Data processing equipment	<u>69,542</u>	<u>1,591</u>	<u>67,951</u>	<u>-</u>
	<u>\$1,689,211</u>	<u>\$336,071</u>	<u>\$1,353,140</u>	<u>\$1,332,289</u>

CANADIAN DENTAL ASSOCIATION
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 1982

3. LONG-TERM DEBT

	<u>1982</u>	<u>1981</u>
Mortgage	\$436,387	\$454,094
Current portion	<u>6,000</u>	<u>6,000</u>
	<u>\$430,387</u>	<u>\$448,094</u>

The mortgage with Canada Trust bears interest at bank prime rate and is due in 1985.

4. COMPARATIVE FIGURES

Certain comparative figures have been reclassified to conform with current statement presentation.

Schedule A.

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF FEE REVENUE

FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	Budget	Actual	Actual
Active and affiliate	\$1,511,400	\$1,555,899	\$1,545,022
Associate	7,000	10,025	8,400
Student	20,000	22,241	18,480
Corporate	128,455	132,823	134,513
D.A.T. Program	70,000	78,352	58,357
Accreditation Program	21,900	17,700	16,300
	<u>\$1,758,755</u>	<u>\$1,817,040</u>	<u>\$1,781,072</u>

Schedule B.

SCHEDULE OF OTHER REVENUE

FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	Budget	Actual	Actual
FDI	\$ 6,000	\$ 6,515	\$ 9,272
Foreign exchange	-	3,289	4,419
Dental Health Month	15,000	17,865	20,392
Annual convention	-	509	26,929
Miscellaneous	-	-	276
	<u>\$ 21,000</u>	<u>\$ 28,178</u>	<u>\$ 61,288</u>

CANADIAN DENTAL ASSOCIATION
SCHEDULE OF JOURNAL OPERATIONS
FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>		<u>1981</u>
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
REVENUE			
Advertising	\$395,000	\$344,019	\$300,744
Subscriptions	12,500	14,444	14,029
Reprints	<u>1,000</u>	<u>612</u>	<u>539</u>
	408,500	359,075	315,312
EXPENSES			
Agency commission	60,600	51,645	44,426
Salaries and benefits	45,000	59,222	38,425
Layout	4,500	2,097	1,684
Printing	255,000	225,785	209,167
Shipping	11,000	11,959	10,795
Postage	60,000	24,640	38,100
Travel	4,500	2,276	3,960
Translation	8,000	11,297	10,201
Sundry	5,000	6,207	4,995
Brokerage	500	-	98
Circulation audit	3,500	1,000	952
Reprints	2,500	378	533
Scientific editors	12,000	6,300	6,300
Telephone	3,500	4,984	2,959
Bad debts	<u>5,000</u>	<u>2,015</u>	<u>4,398</u>
	<u>480,600</u>	<u>409,805</u>	<u>376,993</u>
EXCESS OF REVENUE OVER EXPENSES (EXPENSES OVER REVENUE) FOR THE YEAR	(\$ <u>72,100</u>)	(\$ <u>50,730</u>)	(\$ <u>61,681</u>)

Schedule D.

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF GENERAL AND ADMINISTRATION EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
Office equipment	\$ 35,000	\$ 36,511	\$ 26,762
Insurance	10,000	8,176	7,767
Stationery and supplies	18,000	19,958	19,476
Postage	36,000	33,432	21,451
Shipping and delivery	5,000	4,549	14,815
Telephone	35,000	51,635	45,353
Translation	10,000	8,366	5,240
Data processing	27,800	23,767	28,343
Printing	30,000	20,520	39,249
Professional fees	38,500	32,790	40,282
Grants	21,400	24,161	28,719
Press clippings	2,000	1,458	1,035
General	11,600	13,760	17,325
Bad debts	-	-	797
	<u>\$280,300</u>	<u>\$279,083</u>	<u>\$296,614</u>

Schedule E.

SCHEDULE OF OTHER PUBLICATIONS EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	<u>Budget</u>	<u>Actual</u>	<u>Actual</u>
Pamphlets	\$ 45,000	\$ 45,377	\$ 37,601
Film distribution program	-	4,533	3,634
Communique	18,000	18,329	10,578
	<u>\$ 63,000</u>	<u>\$ 68,239</u>	<u>\$ 51,813</u>

CANADIAN DENTAL ASSOCIATION

SCHEDULE OF TRAVEL AND MEETINGS EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1982

	1982		1981
	Budget	Actual	Actual
Board of Governors	\$ 40,000	\$ 58,249	\$ 38,492
Executive Council:			
Executive Council	35,000	42,305	26,941
Management Committee	25,000	30,613	28,948
Product Acceptance	2,000	3,344	5,511
Membership Committee	1,000	5,602	207
Taxation Committee	2,500	135	1,582
President's Expense	20,000	25,729	29,191
Editorial Board	2,500	3,789	1,911
Council on Dental Materials and Devices	8,000	8,332	6,717
Council on Education	27,000	24,755	16,218
Council on Ethics	5,400	-	-
Council on Health Care	17,000	16,701	13,608
Alternate Delivery Systems	5,000	218	1,656
Council on Hospital Services	7,000	6,562	5,213
Council on Student Affairs	12,500	8,061	11,608
Council on Information Services	7,000	4,328	6,498
Council on Constitution and By-laws	2,500	5,866	-
	219,400	244,589	194,301
Staff travel	33,000	34,710	38,513
Presidents' and Chief Executive Officers' meeting	5,000	9,254	-
Specialty Sections	-	4,108	6,280
	<u>\$257,400</u>	<u>\$292,661</u>	<u>\$239,094</u>
UNBUDGETED PROJECTS			
Conference on Priorities	\$ -	\$ -	\$ 22,129
Manpower Study	-	23,340	15,584
Media Workshops	-	-	8,910
Ad Hoc Committees:			
Licensing	-	-	5,065
Hospital Services	-	503	-
Salaried Dentist Study	-	3,617	-
Peer Review Conference	-	7,524	-
	<u>\$ -</u>	<u>\$ 34,984</u>	<u>\$ 51,688</u>

CANADIAN DENTAL ASSOCIATION
NOTES TO THE 1982 YEAR END STATEMENTS

BALANCE SHEET - PAGE 1

ASSETS

CASH/DEPOSIT
 CERTIFICATE:

Large amount recorded in cash account reflects the absence of term deposits; \$500,000 of term deposits were timed to mature before year end and received into the current account to ease year end accounting procedures: such action is allowable due to minimum difference between corporate account interest rate and current term deposit rates.

ACCOUNTS
 RECEIVABLE:

Amount recorded includes approximately \$6,000 accrued interest, \$8,000 accrued 1982 membership fees and the balance is outstanding invoiced sales for Journal advertising.

PREPAID EXPENSES: Includes amounts paid in 1982 for 1983 projects, such amounts will be allocated to expense accounts in January. This accounting procedure insures a matching of expense to budget.

Convention '83, '84 expenses	\$11,173
'83 Membership Campaign	9,061
'83 Dental Health Month	6,275
Prepaid Insurance	6,211
Prepaid Postage Journal Acct.	2,100
Admin Acct.	2,941

Credit amounts re CICA & CDSPI	
Joint Committee payments	(1,150)
	<u>\$36,611</u>

TRUST ASSETS:

Cash: Amount of \$58,495 includes Library Trust Fund which is a cash account of \$57,373 and the balance is in Grieve Memorial Account.

.../2

BALANCE SHEET - PAGE 1LIABILITIESACCOUNTS
PAYABLE:

Reflect normal monthly accounts owed to suppliers;
\$20,000 increase over 1981 reporting indicates
December Journal printing invoice received later
than usual.

DEFERRED
REVENUE:

Includes -

1983 Membership Fees	\$523,855
1983 Journal Subscription	8,209
Prepaid Advertising	1,536
Prepaid Convention (booths)	9,000
	<u>\$542,600</u>

TRUST
LIABILITIES
& EQUITY:

Records the stewardship of the funds by the
Association and reports the amounts for which the
Association is accountable.

STATEMENT OF REVENUE & EXPENSE - PAGE 2GRANTS
REVENUE:

NDEB	\$ 15,000	Undergrad/Post Grad Accreditation
CFDE	\$ 18,669	Student Conference; Teaching Conference; Student Table Clinic
Product Endorsement	\$ 4,000	CDA Seal of Approval Program
	<u>\$ 37,669</u>	

INTEREST:

\$ 88,866	Term Deposit income
60,015	Current Account income
<u>\$148,881</u>	

.../3

STATEMENT OF REVENUE & EXPENSE - PAGE 2

RENTAL: Budgeted amount is actual rental amounts. Excess recorded is due to escalation clause revenue and cannot be projected in budget because of timing. Reassessment of realty values resulting in lower taxes and reduction in property management costs caused a reduction in recapture in 1982 as compared with 1981.

HONORARIA AND
PER DIEM: Schedule attached.

CONFERENCE
EXPENSE:

		Grants rec'd against Exp.
Student Conference	\$ 8,684	\$8,052
Teaching Conference	6,251	6,251
Table Clinic	4,366	4,366
Annual Convention	<u>13,632</u>	
	<u>\$32,933</u>	

DENTAL HEALTH
MONTH EXPENSE:

In line with previous years; \$15,000 was budgeted as 1982 revenue; \$17,865 was received (page 8):

Recorded Expense	\$30,649
Less:	<u>(17,865)</u>
Actual CDA Expense	<u>\$12,784</u>

NEW REPORTING LINES

MEMBERSHIP
CAMPAIGN:

Includes the cost of printing forms, member cards, letterhead, etc; translation; computer services; shipping, etc. The expenses are divided in the year and accrued at year end to enable the matching of expense with the campaign year.

STATEMENT OF REVENUE & EXPENSE - Page 2NEW REPORTING LINES - cont'd

STUDENT AFFAIRS: Includes translation; printing; Welcome to the Profession receptions, etc. It should be noted that in 1982 approximately \$8,200 was allocated to Student Affairs printing. This expense had previously been absorbed in the Administration printing budget.

FDI
ADMINISTRATION: Includes direct expenses for printing, mailing of applications, photocopy, etc. It does not include staff time, postage, telephone, etc. - absorbed under Administration.
The 1982 Budget included the cost of a direct mailing to dentists - a Journal page was used and therefore we are under Budget.

CANADIAN DENTAL ASSOCIATION

As at December 31, 1982

	<u>Actuals</u> <u>1981</u>	<u>Budget</u> <u>1982</u>	<u>12 Month</u> <u>Budget</u>	<u>12 Month</u> <u>Actuals</u>
<u>PROPERTY MANAGEMENT</u>				
Dep'n Expense - Building	\$ 49,719	\$ 43,941	\$ 43,941	\$ 48,176
Insurance	3,391	4,000	4,000	3,608
Light, Heat & Water	27,130	40,000	40,000	32,227
Mortgage & Interest	66,204	90,000	90,000	70,352
Realty Tax	35,638	40,000	40,000	39,391
Repair & Maintenance:				
Labour - Cleaning & Secur.	12,170	12,500	12,500	13,061
Grounds - Labour & Supplies	3,995	5,000	5,000	7,623
Supplies - Building	3,962	3,500	3,500	2,665
Mechanical Equipment	19,448	15,000	15,000	12,120
Miscellaneous	<u>4,040</u>	<u>3,000</u>	<u>3,000</u>	<u>5,610</u>
	<u>\$ 225,697</u>	<u>\$ 256,941</u>	<u>\$ 256,941</u>	<u>\$ 234,833</u>

4% increase in Expense over 1981; 9% under Budget due to declining interest rates re mortgage. Budget projection was 18% - December rate paid 13.75%.

Miscellaneous includes:

Garage door repairs	\$ 2,538.12
Electrical work	239.75
Window installation	337.33
Repairs Office & Tenant	1,052.75
Miscellaneous (ladies washroom repair, purchase of oxygen tank, internal furn. moving, etc.)	787.50
Window, Carpet, Garage cleaning	<u>655.00</u>
	<u>\$ 5,610.45</u>

	TRAVEL & MEETINGS			PER DIEMS		
	Actuals 1981	Budget 1982	12 Month Actuals	Actuals 1981	Budget 1982	12 Month Actuals
Board of Governors	\$ 38,491	\$ 40,000	\$ 58,250	\$ 20,587	\$ 19,000	\$ 18,105
Specialty Sections	6,281	-	4,107	-	-	-
Executive Council:						
Executive Council	26,941	35,000	42,305	39,866	30,000	47,194
Management Committee	28,948	25,000	30,613	37,314	31,740	21,437
Product Acceptance	5,511	2,000	3,344	-	400	-
Membership Committee	207	1,000	5,602	450	900	4,312
Taxation Committee	1,582	2,500	135	1,084	900	1,350
President's Expense	29,191	20,000	25,729	23,697	23,335	28,350
Editorial Board	1,911	2,500	3,789	-	1,000	250
Council on Education:						
Council Meeting	8,526	10,000	11,737	1,500	3,600	1,700
Dental Admissions Comm.	7,692	14,000	11,136	1,650	1,500	1,050
Continuing Education	-	3,000	1,882	-	500	-
Council on Nominations	-	-	-	-	300	-
Council on Dental Materials & Devices	6,717	8,000	8,332	1,000	1,000	450
Council on Ethics	-	5,400	-	-	1,000	-
Council on Health Care	13,608	17,000	16,701	2,250	2,000	1,800
Alternate Delivery Comm.	-	5,000	218	-	-	-
Council on Hosp. Services	5,213	7,000	6,562	1,600	2,000	2,100
Council on Student Affairs	11,608	12,500	8,061	3,250	1,500	650
Council on Info. Services	6,498	7,000	4,328	2,350	2,500	975
Council on Constitution & By-Laws	-	2,500	5,866	400	500	1,375
Presidents & CEOs	-	5,000	9,254	-	-	1,950
Staff Travel	38,513	33,000	34,710	-	-	-
	\$ 237,438	\$ 257,400	\$ 292,661	\$ 136,998	\$ 123,675	\$ 133,048

CANADIAN DENTAL ASSOCIATION

As at December 31, 1982

BOARD OF GOVERNORS BREAKDOWN

BOARD OF GOVERNORS

	<u>March</u>	<u>September</u>
Attendees expense (1)	\$11,461.43	\$18,939.82
Translation (2)	1,106.92	3,074.72
Taxis	66.05	131.05
Four Seasons: Catering	3,652.50	3,803.79
Pres. Suite	2,798.54	3,073.59
Special Events:		
March/Reception at CDA	2,313.55	
September/President's Dinner		7,691.90
	<u>\$21,398.99</u>	<u>\$36,714.87</u>

(1) September amount includes approximately \$900. 1981 expense.

(2) Administration/translation has absorbed \$1,900 expense for March Board.

NOTES TO THE FIVE YEAR COMPARISON
STATEMENT

The 1979, 1978 figures were obtained from the audited year and statements. Accounting procedures and reporting have changed in the interim. Known differences are:

- A) Revenue/Pamphlets, 1978; income from pamphlet sales were included in Journal revenue.
- B) In 1978/79 grants from NDEB were applied to Accreditation revenue and amounts were apportioned from provincial corporate fees to grants revenue. Accounting procedures were changed in 1980.
- C) Dental Health Month's revenue was netted against the expense account for the year and the remainder was reported as an expense item only.

In addition:

- D) In 1982 the decision was made to report as separate items on the Revenue/Expense statement identifiable programs that had formerly been absorbed in General and Administration accounts.

CANADIAN DENTAL ASSOCIATION
COMPARISON STATEMENT - REVENUE/EXPENSE

	<u>1982</u>	<u>1981</u>	<u>1980</u>	<u>1979</u>	<u>1978</u>
REVENUE:					
Fees					
Journal	\$1,799,340	\$1,764,772	\$1,212,656	\$ 890,357	\$ 846,167
Rental Income	359,075	315,312	285,120	196,397	196,665
Grants	110,556	112,383	107,021	87,898	58,213
Pamphlets	37,669	45,185	44,326	38,524	35,806
Interest	56,911	42,331	40,594	32,694	
Accreditation	148,881	104,902	19,754	25,084	39,035
Other Income:	17,700	16,300	25,150	23,850	26,000
FDI Rec/Pay.	6,515	9,272	4,058	11,111	21,404
Dental Health Month	17,865	20,392	10,634		
Annual Convention	509	26,929	11,379		
Foreign Exchange	3,289	4,419	365		
Miscellaneous	-	276	1,967		
TOTAL	<u>\$2,558,310</u>	<u>\$2,462,473</u>	<u>\$1,763,024</u>	<u>\$1,305,915</u>	<u>\$1,223,290</u>
EXPENDITURES:					
Salaries & Benefits					
Journal	\$ 515,940	\$ 458,949	\$ 408,764	\$ 393,767	\$ 349,250
General & Administration	411,175	376,993	334,594	273,260	196,728
Travel & Meetings	278,383	296,614	245,569	264,364	295,937
Property Management	328,345	290,782	231,294	218,312	228,467
Honoraria & Per Diems	234,833	225,697	194,717	172,166	149,064
Pamphlets	171,984	168,998	155,145	156,339	164,553
Communique	45,377	37,601	27,203	19,212	12,820
Dental Aptitude Program	22,862	14,212	15,286	16,108	23,657
Conferences	45,848	38,459	25,487	29,660	29,083
Accreditation	31,716	38,459	30,946	15,300	14,640
Dental Health Month	27,588	15,009	24,275	31,048	31,554
Membership Campaign	30,649	29,028	24,510	10,419	7,636
Institutional Advertising	11,823				
Student Affairs	1,717				
FDI Admin. Expense	15,314				
	1,487				
TOTAL	<u>\$2,175,041</u>	<u>\$2,000,520</u>	<u>\$1,717,790</u>	<u>\$1,599,955</u>	<u>\$1,503,389</u>
EXCESS OF REVENUE OVER EXPENSES	<u>\$ 383,269</u>	<u>\$ 461,953</u>	<u>\$ 45,234</u>	<u>\$ (294,040)</u>	<u>\$ (280,099)</u>

THE CANADIAN DENTAL RESEARCH FOUNDATION
FINANCIAL STATEMENTS
DECEMBER 31, 1982

McCAY, DUFF & COMPANY

CHARTERED ACCOUNTANTS

JOHN W. FRANKLIN, C.A.
THOMAS W. HOWARTH, C.A.
BRYAN E. SULLIVAN, C.A.
ALBERT G. MONSOUR, S.A.D.M., C.A.
BLAIR E. DAVIDSON, S.COMM., C.A.
CONSULTANT - ELDREN E. McCONNELL, C.A.

330 McLEOD ST.
OTTAWA, ONT.
K2P 2C5
PHONE: 236-2367

AUDITORS' REPORT

To the Members,
The Canadian Dental Research
Foundation.

We have examined the balance sheet of The Canadian Dental Research Foundation as at December 31, 1982 and the statements of current account revenue and expense and surplus and capital account surplus for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the Foundation as at December 31, 1982 and the results of its operations for the year then ended in accordance with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

Chartered Accountants.

Ottawa, Ontario,
January 12, 1983.

THE CANADIAN DENTAL RESEARCH FOUNDATION

BALANCE SHEET

AS AT DECEMBER 31, 1982

	ASSETS	1982	1981
CURRENT ACCOUNT			
Cash		\$ 959	\$ 640
Deposit certificate		5,000	5,000
Accrued interest receivable		<u>1,473</u>	<u>700</u>
		7,432	6,340
CAPITAL ACCOUNT			
Investments, at cost (market value \$18,500, 1981 \$16,640)		<u>19,488</u>	<u>19,488</u>
		<u>\$26,920</u>	<u>\$25,828</u>
	LIABILITY		
CURRENT ACCOUNT			
Due to Canadian Dental Association		\$ -	\$ 357
	MEMBERS' EQUITY		
CURRENT ACCOUNT		7,432	5,983
CAPITAL ACCOUNT		<u>19,488</u>	<u>19,488</u>
		<u>\$26,920</u>	<u>\$25,828</u>

Approved on behalf of the Board:

President_____
Executive Director

THE CANADIAN DENTAL RESEARCH FOUNDATION
 STATEMENT OF CURRENT ACCOUNT REVENUE AND EXPENSE AND SURPLUS
 FOR THE YEAR ENDED DECEMBER 31, 1982

	<u>1982</u>	<u>1981</u>
REVENUE		
Interest	\$ 2,649	\$2,009
EXPENSE		
Annual award	<u>1,200</u>	<u>1,200</u>
EXCESS OF REVENUE OVER EXPENSE FOR THE YEAR	1,449	809
Surplus - beginning of year	<u>5,983</u>	<u>5,174</u>
SURPLUS - END OF YEAR	<u>\$ 7,432</u>	<u>\$5,983</u>

STATEMENT OF CAPITAL ACCOUNT SURPLUS
 FOR THE YEAR ENDED DECEMBER 31, 1982

SURPLUS - BEGINNING AND END OF YEAR	<u>\$19,488</u>	<u>\$19,488</u>
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THE CANADIAN DENTAL RESEARCH FOUNDATION

SCHEDULE OF INVESTMENTS

AS AT DECEMBER 31, 1982

	<u>Cost</u>
\$5,450 Canada 4.5% bonds, due September 1, 1983	\$ 5,376
\$7,000 Canada Permanent Mortgage Corporation, 16.25% debenture, due March 12, 1983	7,000
\$5,000 Hydro-Electric Power Commission of Ontario 9% bonds, due April 1, 1994	5,180
\$2,000 Province of Ontario 9% debentures, due July 1, 1983	<u>1,932</u>
	<u>\$19,488</u>



APPENDIX D

Ontario
Securities
Commission

416/963-

10 Wellesley Street East
Toronto, Ontario
M7A 2H7
Telex 06217548
TDX 76

IN THE MATTER OF THE SECURITIES ACT
R.S.O. 1980, C.466

AND

IN THE MATTER OF CERTAIN GROUP INVESTMENT PLANS
SPONSORED BY THE ONTARIO SECONDARY SCHOOL TEACHERS'
FEDERATION, THE CANADIAN DENTAL ASSOCIATION, AND
THE CANADIAN MEDICAL ASSOCIATION

(SECTIONS 73 & 140)

Hearing: September 30, 1982

Present:	Henry J. Knowles, Q.C.	- Chairman
	Robert T. Morgan, C.F.A.	- Commissioner
	Edgar S. Miles	- Commissioner
	Geddes M. Webster, P.Eng.	- Commissioner
	Alfred T. Holland, C.A.	- Commissioner
	Dean Frank Iacobucci	- Commissioner
	Gavin MacKenzie)	Counsel,
	Walter J. Palmer)	Canadian Dental
		Association
		("CDA")
	Patricia J. Myhal)	Counsel,
		Ontario
		Secondary
		School Teachers'
		Federation
		("OSSTF")
	George A. Bragg)	Counsel,
		Canadian
		Medical
		Association
		("CMA")
	J. David Jackson)	Counsel, Trust
		Companies
		Association of
		Canada
	Keith Douglas)	President,
		Investment
		Funds Institute
		of Canada
40	Richard A. Lococo)	
	Susan I. McCallum)	Staff Counsel

REASONS FOR DECISION

At a hearing held on September 30, 1982, the Commission considered two separate applications under section 73(1) of the Securities Act (the "Act") for rulings that trading in units of certain existing investment funds sponsored by the CDA and the OSSTF are not subject to section 24 or 52 of the Act, and also considered whether to revoke or vary, pursuant to section 140 of the Act, the ruling granted on November 28, 1981 with respect to trading in units of a similar investment fund (the "CMA Ruling") sponsored by the CMA.

It would be useful to set forth very briefly the facts that provide the background for the applications before discussing the relevant statutory provisions and related arguments submitted by counsel.

FACTS

A. OSSTF Application

The applicants for the OSSTF application are the OSSTF and Montreal Trust Company of Canada ("Montreal Trust"). The OSSTF was founded in 1919 and was incorporated in 1925 as an Ontario corporation without share capital to represent secondary school teachers in the province. It is affiliated with the Ontario Teachers' Federation, which was established in 1944 by the Legislature under the predecessors to the Teaching Profession Act, R.S.O. 1980, c.495.

In January, 1975, the OSSTF and Montreal Trust created certain group investment plans for OSSTF members. Pursuant to an agreement (as amended, the "OSSTF Trust Agreement") between the OSSTF and Montreal Trust, Montreal Trust acts as trustee in respect of the Ontario Teachers' Group Retirement Savings Plan and the Ontario Teachers' Group Home Ownership Plan (collectively, the "OSSTF Plans"). Participation in the OSSTF Plans is limited to the members of the teaching profession in Ontario, their spouses, retired teachers and OSSTF administrative staff.

The OSSTF Plans provide that contributions by participants are invested in a pooled fund (the

"OSSTF Plan Fund") maintained by Montreal Trust. The OSSTF Plan Fund currently has four investment sections among which participants may direct their contributions: the Fixed Value Portfolio (fixed-value securities), the Mortgage Income Portfolio (mortgage loans, primarily to teachers who qualify under the guidelines established by Montreal Trust), the Diversified Portfolio ("blue chip" securities) and the Aggressive Equity Portfolio (other qualified securities). Under the OSSTF Trust Agreement, Montreal Trust agrees that all investments will be made in compliance with applicable tax legislation in respect of registered retirement and registered home ownership plans. The OSSTF Plan Fund currently has assets with a market value in excess of \$27,000,000, and the OSSTF Plans have approximately 6000 participants.

Montreal Trust manages the OSSTF Plan Fund, but the OSSTF Trust Agreement also provides for the appointment of the OSSTF as agent for Montreal Trust for limited administrative purposes relating to OSSTF Plans, including the dissemination of information to prospective participants and the servicing of mortgages. The fees and expenses of the OSSTF with respect to such services are charged to the OSSTF Plan Fund. Montreal Trust has also retained Toronto Investment Management Inc., a registered portfolio manager, as the investment adviser with respect to assets held in the OSSTF Plan Fund other than those represented by mortgages. The total fees and expenses charged to the OSSTF Plan Fund by Montreal Trust, the OSSTF, and Toronto Investment Management Inc. in 1981 were approximately \$224,000, which amounted to approximately .85 of 1% of the average net asset value of the OSSTF Plan Fund in 1982.

No prospectus has been filed with the Commission with respect to the offering of the OSSTF Plans. Information on the OSSTF Plans has been and is made available by the OSSTF through its R.R.S.P. Committee to interested teachers upon request and at teacher workshops and professional gatherings which are held from time to time. The following disclosure with respect to the OSSTF Plans is provided to participants and prospective participants:

1. To Prospective Participants:

- (a) A booklet entitled "Ontario Teachers' Group R.R.S.P. Information Booklet", which is updated from time to time;
- (b) A pamphlet entitled "Ontario Teachers' Group Home Ownership Savings Plan"; and

- (c) A bulletin setting out a brief description of the R.R.S.P. Plan (distributed to all teachers in January of each year).

2. To All Participants:

- (a) A copy of the relevant Declaration of Trust, provided at the time of joining a plan;
- (b) An annual statement setting out all contributions made by the participant in respect of the immediately preceding calendar year, the total contributions of the participant to the OSSTF Plans, and the value of the units held for the account of the participant;
- (c) Audited annual financial statements (first required by way of amendment to the OSSTF Trust Agreement in January, 1982); and
- (d) A semi-annual report of the investment adviser, accompanied by commentary by OSSTF's R.R.S.P. Committee.

3. To Participants on Request:

- (a) A schedule entitled "Portfolios and Unit Values", which provides historical data on the value of the portfolios and units; and
- (b) Items 1(a) and (b) above.

B. CDA Application

The applicants in the CDA application are the CDA, the Canadian Dental Service Plans Inc. (the "CDSPI"), and the Royal Trust Company ("Royal Trust"). The CDA, a Canada corporation without share capital, is an association of Canadian dentists incorporated to further the interests of its members. The CDSPI, a Canada corporation without share capital, has as its members the CDA and each of the provincial statutory licensing bodies or corporations. The purpose of CDSPI is to make recommendations and provide administrative services with respect to the offering and implementation of co-operative benefit plans to CDA members.

In 1957, the CDA established the Canadian Dental Association Retirement Savings Plan (the "CDA Plan") pursuant to an agreement (the "CDA Trust Agreement") with Royal Trust as trustee. The CDA Plan has undergone a series of amendments. Participation in the CDA Plan is limited to dentists, dental surgeons, their employees, CDA employees, employees of the provincial dental associations or corporations, and spouses of the foregoing individuals. When an eligible individual wishes to participate in the CDA Plan, an application form is completed and submitted to Royal Trust, which registers a separate retirement savings plan ("R.S.P.") for the participant. The participants direct their contributions to one or more of four separate trusts (the "CDA Plan Funds"), designated as the Common Stock Fund, the Fixed Income Fund, the Balanced Fund, and the Guaranteed Fund, at unit values established monthly. The CDA Plan Funds currently have assets of more than \$30,400,000 and the CDA Plan has approximately 2000 participants, approximately 1000 of whom are Ontario residents.

Royal Trust manages the CDA Plan Funds. The CDSPI acts as an intermediary in processing instructions from participants and co-operates with Royal Trust in preparing the CDA Plan's annual report and in updating annually the summary description of the CDA Plan. Royal Trust and CDSPI both receive an annual fee based on the asset value of the CDA Plan Funds of approximately one-half of one percent and no other fees are charged to the CDA Plan Funds or the participants.

No prospectus has been filed with the Commission with respect to the offering of the CDA Plan. The following disclosure with respect to the CDA Plan is provided to participants and prospective participants:

1. To Prospective Participants:

- (a) a summary description of the CDA Plan and the CDA Plan Funds (to be updated annually);
- (b) an application form;

- (c) a copy of the Declaration of Trust with respect to each R.S.P.; and
- (d) a copy of the latest annual report of the CDA Plan.

2. To Participants:

- (a) the annual report of the CDA Plan (not including audited financial statements); and
- (b) a quarterly statement detailing the current value of units held by the participant's R.S.P. in each CDA Plan Fund.

C. The CMA Ruling

The CMA Ruling [(1981) 2 OSCB 315B] permitted the offering of units in the CMA Investment Fund (the "CMAIF"), participation in which is available to CMA members, employees of the CMA and its affiliates, and dependants of eligible participants. The CMAIF has been in existence since 1966, and in 1981 had assets in excess of \$150,000,000. The CMA Plan is similar to the CDA Plan, except that:

- 1. Units are promoted and sold through a registered dealer, MD Management Limited ("MD"), a wholly-owned subsidiary of the CMA; and
- 2. The trustee and manager (Royal Trust) has retained a registrant to give investment advice (as in the case of the OSSTF Plan Fund).

The conditions of the CMA Ruling restrict the total annual fees payable to Royal Trust, MD, and the investment adviser to not more than 0.5% of the net asset value of the CMAIF, and no other fees may be payable in respect of selling, administering, managing or trusteeship. As well, each person who subscribes for units must be provided with a copy of the CMA Ruling together with a statement that the Ruling deprives such person of certain rights and remedies provided by the Act.

THE ISSUE

For ease of reference, the OSSTF Plan Fund, the CDA Plan Funds and the CMAIF are collectively referred to as the "Funds".

What the Commission must determine is whether, in the circumstances under consideration, it is prepared to extend the present exemption applicable to private mutual funds under the Act to the Funds.

THE LAW AND RELATED SUBMISSIONS

A. Statutory Background

Section 1(1)25 of the Act defines a mutual fund as follows:

"'mutual fund' includes an issuer of securities that entitle the holder to receive on demand, or within a specified period after demand, an amount computed by reference to the value of a proportionate interest in the whole or in a part of the net assets, including a separate fund or trust account, of the issuer of the securities."

Section 34(2)3 of the Act provides that, subject to the regulations, registration is not required to trade in securities issued by a private mutual fund.

Section 72(1)(a) of the Act provides that sections 52 and 61 do not apply to a distribution of the securities referred to in section 34(2)3.

Section 1(1)32 of the Act defines a private mutual fund as follows:

"'private mutual fund' means a mutual fund that is,

- (i) operated as an investment club, where,
- (a) its shares or units are held by not more than fifty persons and its indebtedness has never been offered to the public;

- (b) it does not pay or give any remuneration for investment advice or in respect of trades in securities, except normal brokerage fees; and
- (c) all of its members are required to make contributions in proportion to the shares or units each holds for the purpose of financing its operations, or
- (ii) administered by a trust company registered under the Loan and Trust Corporations Act and consists of,
 - (a) a pooled fund maintained solely to serve registered retirement savings plans, registered home ownership savings plans, or other savings plans registered under the Income Tax Act (Canada);
 - (b) a common trust fund as defined by subsection 111(1) of the Loan and Trust Corporations Act; or
 - (c) a pooled fund maintained by a trust company in which moneys belonging to various estates and trusts in its care are commingled, with the authority of the settlor, testator or trustee thereof, for the purpose of facilitating investment where no general solicitations are made with a view to the sale of participations in the pooled fund."

The exemptions provided by sections 34(2)3 and 72(1)(a) of the Act are stated by section 19(2) of the regulation made under the Act (the "Regulations") not to apply to securities of a mutual fund administered by a trust company if there is a promoter or manager of the mutual fund other than the trust company.

Promoter is defined in section 1(1)33 of the Act to mean:

- "(i) a person or company who, acting alone or in conjunction with one or more other persons, companies or a combination thereof, directly or indirectly, takes the initiative in founding, organizing or substantially reorganizing the business of an issuer...."

Section 14(d) of the Regulations provides a comparable prospectus exemption as follows:

"14. Section 52 of the Act does not apply to a distribution of securities where:

- (d) the trade is made in a security of a mutual fund that,
 - (i) is administered by a trust company registered under the Loan and Trust Corporations Act,
 - (ii) has no promoter or manager other than one or more trust companies registered under the Loan and Trust Corporations Act, and
 - (iii) consists of a pool of funds maintained solely to serve retirement income funds, deferred profit sharing plans and pension plans registered under the Income Tax Act (Canada), alone or in combination with retirement savings plans, home ownership savings plans, or other savings plans registered under the Income Tax Act, (Canada)."

The corresponding exemption from section 24 is contained in section 140(a) of the Regulations.

Bill 176, entitled the Securities Amendment Act, 1982 ("Bill 176") consolidates the above provisions of the Regulations and eliminates the restriction that the manager of the mutual fund must be a trust company by revising section 1(1)32(ii)(a) of the Act to read as follows:

"'private mutual fund' means a mutual fund that is

- (ii) administered by a trust company registered under the Loan and Trust Corporations Act and has no promoter other than one or more of such trust companies or one or more affiliates of such a trust company and has no manager other than one or more of such trust companies, one or more of such affiliates or a person or company who is a

portfolio manager or but for the applicability of an exemption under this Act or the regulations would be obliged to be registered as a portfolio manager and consists of,

- (a) a pooled fund maintained solely to serve retirement savings plans, home ownership savings plans, retirement income funds, deferred profit sharing plans, pension plans, or other such plans registered under the Income Tax Act (Canada)...."

The effect of the above provisions is that the registration requirements do not apply to private mutual funds and the prospectus filing requirements do not apply to securities of a private mutual fund so long as the mutual fund is administered by a trust company registered under The Loan and Trust Corporations Act (R.S.O. 1980, c. 249) and consists of a pooled fund maintained solely to serve registered retirement savings plans, registered home ownership savings plans or other savings plans registered under the Income Tax Act (Canada), provided there is no promoter or manager of the mutual fund other than the trust company. In short, according to Staff Counsel for the Commission, the Funds would fit within the present definition of a private mutual fund (and the applications would thus be unnecessary) were it not for the following facts:

1. The CDA, OSSTF, and CMA took the initiative to found or organize each of their respective Funds, and therefore are promoters of the Funds;
2. The trustee of each of the OSSTF Plan Fund and the CMAIF has retained a registrant to perform a management function, namely the giving of investment advice, which is permitted under Bill 176, but not under section 19(2) of the Regulations; and
3. The OSSTF and the CDSPI both assist, albeit to a limited extent, in management functions for their respective Funds.

B. Related Submissions

Counsel for the Funds very ably presented arguments in support of the Commission's granting an

exemption. In summary, the major submissions made on behalf of the applicants and reasons for granting the exemption were as follows:

1. The definition of "promoter" in the Act should be interpreted in the present context as meaning someone who has a vested and substantial economic interest in the operation of a mutual fund, and such is not the case with respect to the CDA, OSSTF, and CMA and their respective Funds which are intended to operate only as a service to their members and not for profit. The applicants are hence promoters only in a technical sense and could more appropriately be called "sponsors".
2. Although "manager" is not defined in the Act or Regulations and two of the Funds retain a duly registered portfolio manager to render investment advice, such registrants are controlled by the Trustee and in any event Bill 176 would allow such a practice without denying an exemption.
3. The Funds are not offered for sale to the public and result from a concern of well recognized professional associations to provide retirement and related savings advice and services for their members. Although there are non-members of the associations who are eligible for participation in the Funds, they are very few in number.
4. The applicants do provide considerable information about the Funds to potential and actual participants and would be willing to provide more if the Commission so stipulated in granting an exemption order.
5. The requirements to file a prospectus in respect of the Funds and to file annual renewals would cause considerable extra expense that would have to be borne by the Funds to the detriment of their members and would provide nothing more to members or prospective members by way of useful information than that which is already available to them.

Staff Counsel in a well presented argument made a number of submissions in support of denying the exemption sought or alternatively to grant the exemption with specific conditions. Counsel for the Trust Companies Association of Canada and the President of the Investment Funds Institute of Canada stated that they neither supported nor opposed the present application. However, Counsel for the Trust Companies Association went on to say that, if the present private mutual fund exemption in the Act were to be changed by the Commission, the Association would expect it and other interested parties to have the opportunity to make representations on the matter.

RULING OF THE COMMISSION

The Commission has concluded that it must refuse the exemption sought. The language of each of the Act and Regulations is quite clear in denying the private mutual fund exemption if there is a promoter or manager of the mutual fund other than a trust company. The first branch of the definition of "promoter", viz. "a person or company who, acting alone or in conjunction with one or more persons, companies or a combination thereof, directly or indirectly, takes the initiative in founding, organizing or substantially reorganizing the business of an issuer", (section 1(1)33) describes what each of the CDA, OSSTF and CMA did in creating their respective Funds. We can find no reason why the plain words of the definition should be disregarded and we are not persuaded that the term "promoter" should be defined to include only those persons with a substantial economic interest in the operation of a mutual fund. Although "manager" is not defined in the Act, by the ordinary meaning of the term, we find as a fact that the OSSTF and CDSPI certainly assisted in the management of their respective Funds and were, accordingly, "managers". However, even assuming that they were not managers, the fact they are "promoters" is enough to deny the exemption.

Looking at the policy that should govern in this case, the Commission was impressed and concerned by the great number of potential and actual participants in each of the Funds. Although the participants are, in the main, united by professional ties, this fact is not sufficient in our view to avoid the application of the Act. Interests in the Funds are widely held by many participants, albeit mostly members of a specific professional group within the greater public at large. In that connection we cannot conclude that the compliance with, and the

resulting protection afforded by, the Act is either unwarranted or even undesirable in the circumstances.

We note that participants in the Funds do receive much information and Counsel for the applicants offered to modify what is presently furnished. The willingness to provide adequate information to the Funds' participants is itself a recognition of the importance of full disclosure to those who enrol in the Funds. However, were the Commission persuaded to grant an exemption it would have to draft or design in effect a new form of prospectus that is akin to Form 15 and Form 15A under the Act and Regulations relating to mutual funds. The necessity to develop a new form of disclosure document gives the Commission some disquiet in granting an exemption when the Act and Regulations already provide detailed guidance in Form 15.

The applicants state that the obligation to file a prospectus adds to the cost of administering the Funds. The Legislature and the Commission are fully aware of that since compliance with regulations means incurring costs. Indeed, the Commission is most reluctant to impose additional costs on the Funds. But the basic question is whether the benefits or advantages of regulation to participants and potential participants outweigh these costs, and we think they do despite the difficulty of answering the question in any detailed or quantified way.

Under the circumstances, the Commission denies each of the applications for exemption and varies the CMA Ruling by ruling pursuant to section 73 of the Act that:

- (1) units in the Funds operated by the CDA and OSSTF be traded until the later of March 31, 1983 and the expiration of 60 days after the end of the respective current fiscal year of each Fund without compliance with sections 24 and 52 of the Act, and thereafter, units of such Funds be traded only pursuant to a prospectus in accordance with the Act and Regulations; and

- (2) the CHA Ruling be varied to provide that it shall expire on the later of March 31, 1983 and the expiration of 60 days after the end of the current fiscal year of the CHAIF.

We thank all counsel for their very able and useful presentations.

Dated at Toronto, Ontario as of 15th day of
November 1982.

<u>Henry J. Knowles</u>	<u>[Signature]</u>
<u>[Signature]</u>	<u>SS/Diles</u>
<u>A. Halland</u>	<u>[Signature]</u>

DRAFT - January 7, 1983

The Secretary
Ontario Securities Commission
Suite 1700
Box 55
20 Queen Street West
Toronto, Ontario
M5H 3S8

Dear Sir:

Ruling of the Ontario Securities Commission
dated November 15, 1982 under Section 73
regarding a group investment plan sponsored
by The Canadian Dental Association

On March 17, 1982 an application (the "Application") dated March 16, 1982 by Canadian Dental Association, Canadian Dental Service Plans Inc. and The Royal Trust Company was filed with the Ontario Securities Commission. The Application was for an order that the trading of units in the four Funds with registered retirement savings plans held under the Canadian Dental Association Retirement Savings Plan was not subject to section 24 or section 52 of the Act. For the purposes of this letter, terms defined in the Application have the same meanings as are ascribed thereto therein.

On November 15, 1982 the Commission issued a ruling (the "Ruling") denying the Application but the Commission did issue an order permitting units in the Funds to be traded until the later of March 31, 1983 and the expiration of 60 days after the end of the current fiscal year of the Funds. The current fiscal year of the Funds expires on February 28, 1983 and accordingly the Ruling permits trading in units of the Funds until April 29, 1983.

As set out in the Application, CDA is an association of Canadian dentists which has been incorporated for the purpose of furthering the interests of its members. The CDA sponsored the establishment of the Plan in 1957 and, through CDSPI, has supervised the operations of the Plan and the Funds and has initiated changes and amendments in an effort to ensure that the best possible Plan is provided to the members of the CDA.

In light of the Ruling, CDA and CDSPI must make a number of important decisions with regard to the Plan and the Funds and, in making such decisions, must continue to ensure that the interests of the CDA members are protected. As set out in our letter to the Commission of October 13, 1982 there is some question as to whether Royal Trust will be prepared to continue to operate as manager of the Funds under the present arrangement now that full compliance with the Act will be required. In addition, as indicated in Schedule B enclosed with that letter, the logistics of providing weekly valuations is unknown primarily because at present Royal Trust is not capable of providing such information. Forthwith following receipt of the Ruling, CDSPI requested Royal Trust to indicate whether it would be prepared to continue to be the manager of the Funds under the present arrangements and whether it would be able to provide weekly valuations. In addition, assuming Royal Trust was prepared to continue to act as manager and could provide weekly valuations, estimates of applicable fees were requested. Royal Trust has recently communicated its preliminary decisions on each of those matters to CDSPI and those preliminary decisions have caused CDSPI to believe that other alternatives must be examined seriously.

If a substantial change in the Plan is to be made, additional expense will undoubtedly be incurred and there may be some inconvenience to participants in the Plan. In order to fulfil their responsibility to protect the interests of the CDA members, CDA and CDSPI will necessarily have to examine in detail all of the alternatives and combinations of alternatives (including the applicable costs and the apparent skill and competence of investment managers in each case) in an effort to determine the best possible manner of effecting compliance with the Ruling so that further substantial changes in the Plan will not be required in the foreseeable future.

Naturally, a substantial amount of time will be required to obtain the necessary information from all of the appropriate sources and to analyze the information received. Once the decision has been made as to the appropriate manner of proceeding, a reasonable amount of time will be required to put the decision into effect. If the final decision is to effect compliance by restructuring the Funds and filing a prospectus, recognition must be given to the fact that, not only must any reorganization be accomplished and the initial form of prospectus be prepared and filed, but also a sufficient period of time must be allowed for the prospectus to be reviewed by the Commission's staff and for deficiencies, if any, to be resolved. As an example, it will take an extended period of time to obtain all of the financial statements required for a prospectus considering that formal audited financial statements for the Funds have never been prepared in the past. If the final decision is not to qualify the Funds under

the Act, an appropriate period of time must be allowed to permit participants in the Plan to be notified and to transfer their savings in an orderly and efficient manner.

CDA and CDSPI believe that the interests of the CDA members cannot be adequately protected if a final decision must be made as to manner of compliance and such compliance put fully into effect by April 29, 1983. On behalf of CDA and CDSPI, we hereby request that the Commission, pursuant to section 140 of the Act, vary the Ruling to permit units in the Funds to be traded until June 30, 1983 without compliance with sections 24 and 52 of the Act.

Yours truly,

CAMPBELL, GODFREY & LEWTAS

By:

W. J. Palmer

WJP/ra

EDITORIAL BOARD

REPORT OF THE CDA EDITORIAL BOARD
TO THE EXECUTIVE COUNCIL

Members: Dr. A.E. MacLeod, Halifax, Chairman
Dr. J.D.R. Grier, Victoria, British Columbia
Dr. M.D. Klotz, Willowdale, Ontario
Dr. A.D. Sparrow, Calgary, Alberta

1. The Editorial Board met December 2, 1982.

Item of Business to be Discussed

2. Editorial and Publishing Policy of the Journal

Members noted with approval that in addition to publishing articles of a scientific and clinical nature, the Journal is reporting CDA's strong leadership activities among health professions, e.g. lobbying the government on matters such as tax plans. The Editorial Board agreed that more special interest articles should be published to keep members updated on important events which affect their practices. Many of these articles would be written by outside professionals such as tax lawyers and accountants.

The Editorial Board updated its editorial and publishing policy with the following revision:

"The encouragement of scientific, clinical and special interest articles, written by Canadian authors."

APPENDIX A

Items of Business for Information

3. a) Budget

The budget figures for 1982 are very encouraging. Although advertising revenue is below expectations, reductions in the weight of the paper stock in the Journal and the new second class postage rate, have substantially reduced expenditures.

- b) Late News Insert

A "late news insert" format was implemented in the November edition of the Journal. The Editor is encouraged by its effectiveness and will consider utilising this more often.

Items of Business for Information - Continued

c) Readership Survey

The Editorial Board is considering a readership survey. This will provide desired feedback from the readership. The same edition of the Journal in which the readership survey form is included, will also have an article introducing the new Editorial Board and its responsibilities.

d) Report on CCAB

An investigation is being conducted into the feasibility of maintaining second class postage for the Journal but under a different category, which if implemented would represent an additional saving of approximately \$700 a month.

e) Report on Non-Dental Advertising

Efforts will be made to increase non-dental advertising in the Journal i.e. liquor and wine advertisements. Also methods are being formulated to increase the classified advertising volume.

f) Number of Advertising Pages - Total Number of Pages

It was noted with satisfaction that the number of advertising pages was increasing each year.

4. Summary and Conclusions

While the present finances of the Journal are healthy, the Editorial Board is aware that the country's economic condition makes our potential income in the future somewhat uncertain.

The resignation of Ann Hammell is noted with considerable regret as she contributed greatly to our Journal from her first contact with CDA in 1978 through the present time.

Respectfully submitted,

Dr. A.E. MacLeod
Chairman
Editorial Board

EDITORIAL AND PUBLISHING POLICY OF THE JOURNAL

- a) Excellence in journalism.
- b) Excellence in editorial and advertising content.
- c) The publication of worthy original scientific and clinical articles.
- d) The encouragement of scientific, clinical and special interest articles, written by Canadian authors.
- e) The publication of an editorially well-balanced Journal in French and English that will be of interest to the greatest number.
- f) The dissemination of news and association business in concert with all other association publications.
- g) The Journal should be distributed to members of the Association and such others as the Board of Governors may determine from time to time.
- h) The Journal should aim to operate on a balanced budget. From time to time, however, subsidization may be required.

REPORT OF THE MEMBERSHIP COMMITTEE

Members: Dr. D.E. Williams, Chairman
Dr. B.W. Holmes, Ontario
Dr. R. Hurley, Quebec
Dr. J. Laporte, Quebec
Dr. L. Tomkins, Ontario

The third meeting of the newly-structured Membership Committee was held in Ottawa on December 10, 1982. The major topic of discussion concerned the planning for workshops to be held in Toronto and Montreal on February 12, 1983. This is a new venture this year.

We are conducting the "phone blitz" a month earlier this year. For the first time, a phone campaign is to be held in Montreal plus several other centres in both Quebec and Ontario, involving many more volunteers.

Target groups among our potential members have been identified and a more specific appeal will be made to each group. Drs. B.W. Holmes and J. Laporte are heading up the campaigns in their respective provinces again this year with the assistance of Dr. Gary Pitkin and Dr. Irwin Margolese.

President Bill Thompson is taking an active part in the campaign and welcomes an invitation to speak at major meetings in both provinces.

The campaign includes two mailings sent before year-end, and a decision will be made in January on a third mailing.

The workshop is designed to aid volunteers in the telephone campaign. Approximately fifteen people will participate in each workshop - one to be held in Toronto and one to be held in Montreal on February 12th. Using February 2, 1983 as a cut-off date, we will use membership lists from the CDA, ODA and ODQ for our blitz. The telephone campaign is scheduled to be conducted between the dates of February 12th and February 18th. Comparatively sophisticated material has been adapted for the use of the callers. This material should permit us to monitor our results plus provide the callers with current fact sheets on CDA activities. While our word processor is in its infancy, we anticipate it will start to serve us well at this time.

Four major groups have been targetted - current members, non-members, new graduates and associate members. These groups have been further divided, ie. private practice, salaried dentists who are teaching, salaried public health dentists, and salaried military dentists, etc. Each group has its own divisional break-down.

Membership Report - continued..

Dr. Rita Hurley and Dr. Lynn Tomkins have been recruiting members from fourth-year classes in the voluntary provinces to promote CDA membership. This program will be structured to be repeated for two years after a student has graduated. The Committee feels that this area of our activities has great potential. The fee payment, approved by the Board in two installments when joining the first year after graduation, has been initiated and it has been emphasized that this is a yearly commitment.

President Bill Thompson has agreed to be actively involved in the campaign despite his already heavy workload. To date, he has travelled to Pembroke and to the Northern Ontario Dental Association meeting in Timmins to speak to concerned dentists. Further, he attended the Deans' Luncheon with the students at the University of Toronto, the All Toronto Dental Societies meeting, the Ontario Dental Association Board meeting and in Quebec, he has spoken to the Dental Societies of Greater Montreal.

Further to this, Governors and CDA representatives have spoken at the CDA "Meet the Profession" sessions at various dental schools as listed in Appendix A. Migration of students to voluntary provinces makes this a very important function. APPENDIX A

The campaign unofficially started with campus activities including the distribution of the Dental Forum publication to all dental students. APPENDIX B

The first mailing, with a message from the President, on November 10, 1982, officially opened the campaign. This mailing and a second one in December are attached as Appendix C. APPENDIX C

The Communiqué of October, reporting on the audits of Management Companies and announcing the "Call the President" days was well received. Over 810 responses to the questionnaire on Management Companies were returned and I will let the President report on his first effort on "Call the President" days. Dr. Thompson is to be congratulated for this initiative.

A third mailing may go out in January to alert the non-members that we will be conducting a phone campaign.

The CDA and the ODA Journals have been used as membership promotion vehicles. We have had an article in the ODA Journal by Dr. Holmes and in the CDA Journal by yours truly. The article in the CDA Journal on Councils and Committees was also a good promotion feature.

The CDA booth with its new design will continue to be used at major meetings.

Membership Report - continued...

Returns to date are encouraging but we can only maintain this position by a concerted effort by all dentists promoting the Canadian Dental Association.

APPENDIX D

We have set a 50% increase in cost of pamphlets and posters to non-members and they will be informed of this fact in the next mailing. The Med-Lars search will continue to be free to members; however direct expenses to the Association will have to be charged.

Other topics were considered including development of an audio-visual presentation promoting the Canadian Dental Association. Dr. Holmes and Mr. Drouin will continue to work with the officers of the Ontario Dental Association to develop a conjoint campaign. Unfortunately in Quebec, legislation makes it impossible for us to conduct a conjoint campaign and this is respected.

Letters soliciting nominations for Honorary Membership in CDA will be sent to all Corporate Members by the Executive Director this month.

In closing, I would like to say that the biggest problem we face in selling the need for every dentist in Canada to be a member of CDA is not so much the service that is performed by CDA on their behalf but the perception that many dentists have of the service. We are much more effective than some of our members perceive. Our major problem is how little members and non-members know about what the CDA is really doing for them.

I thank all Committee and Staff members for making this report possible and hope we will have some glowing numbers to report at the end of the campaign.

"MEMBERSHIP PROMOTION IS EVERY MEMBER'S DUTY!"

Respectfully submitted

D.E. Williams, Chairman
Membership Committee

January, 1983

The following is a review of CDA student receptions which have been held to date:

<u>FACULTY</u>	<u>DATE</u>	<u>SPEAKER</u>
University of Toronto	September 2	Dr. W.R. Thompson
University of British Columbia	September 7	Dr. R.N. Hicks
McGill University	September 28	Dr. W.R. Thompson
University of Saskatchewan	September 29	Mr. D. McLeod Student Governor
University of Western Ontario	October 7	Dr. B.W. Holmes
University of Montreal	October 21	Mr. H.E. Druoin
University of Alberta	October 28	Dr. D.L. Thompson
Dalhousie University	November 16	Dr. D.E. Williams

N.B.: University of Laval and University of Manitoba are not yet scheduled.

January, 1983

published by the Council on Student Affairs APPENDIX B

DENTO- FORUM

Your 1982-83 Council Representatives

Last October, CDA representatives met in London, Ontario, to discuss matters of interest and concern to dental students across the country.

Your representatives to CDA's Council on Student Affairs are:



FROM LEFT TO RIGHT:

Front Row: Julie Boudreau (Université Laval) – Dr. Rita Hurley (Montreal) – Jane Metler (University of Western Ontario) – Linda Teeruck, (CDA Director of Education) – Andy Hasegawa (McGill University)
Middle Row: Licia Verardo, Conference Co-Ordinator (University of Western Ontario) – Alain Thivierge, Chairman (Université de Montréal) – Dr. Peter Judd (Toronto) – Ed Busvek (University of Toronto)
Back Row: Dr. Brad Holmes (CDA Executive Council Liaison) – Don Trider (Dalhousie University) – Rick Chilibeck (University of Alberta) – Tim Barker (University of Saskatchewan) – Peter Kowal (University of Manitoba) – André Ruest (Université de Montréal) – Bob Scott (University of British Columbia)
Absent: Dave McLeod (University of Saskatchewan)

Council News

By Alain Thivierge*

The Council on Student Affairs of the Canadian Dental Association wishes to thank each dental student across the country for your continuing support and interest in our activities.

Dental student awareness of our Council activities has increased dramatically through the publication of our twice yearly newsletter – Dento-Forum. Various sectors of organized dentistry have expressed interest in our publication and beginning with this issue, CDA's Board of Governors, its specialty sections and affiliated groups, will receive a copy. Copies also will be sent to graduate students and new graduates.

Council feels that its responsibilities extend to both undergraduates and graduate students. Each CDA representative has a mandate to keep abreast of the concerns and interests of all students at his/her faculty. In turn, it is hoped that both groups will channel their views to their CDA rep.

Last October, Council met in London, Ontario, in conjunction with the annual Canadian Dental Students' Conference. Each year, CDA student representatives from across Canada gather on site at a Canadian dental faculty to discuss issues of mutual interest and visit with dental students from other faculties.

The Conference agenda included guest speakers from various sectors of organized dentistry (i.e., the National Dental Examining Board of Canada, the Canadian Fund for Dental Education, Canadian Dental Service Plans Inc.), an informal lecture on the legal aspects of dental practice, and a full social program.

The annual Students' Conference has been an ongoing activity of the Canadian Dental Association for over thirteen years, with funds generously received from Colgate-Palmolive Canada and the Canadian Fund for Dental Education.

Canadian Dental Association, December 1982



1815 Alta Vista Dr
Ottawa, Ontario
K1G 3Y6

Immediately following the Conference, Council traditionally meets to discuss business arising from this and other meetings. Our October meeting included reviewing the practice administration manual being compiled by Council under the direction of Dr. Bob Brandon of London, Ontario. We feel that a close scrutiny and evaluation of this manual by Council and other related groups will assure a comprehensive and helpful manual for both the dental student and practitioner.

Council also has been collecting comparative information on the ten dental faculties, i.e., the cost of dental education, each school's clinical programs, the number of full/part time staff, etc.

We are pleased to report that the tier system of CDA representation has been accepted by all ten schools. CDA student representatives are now elected during their first year to serve a three-year term. In this way, they are better prepared for their role and responsibilities on Council.

In turn, Council activities have become more streamlined with less need for repetition of information from year to year.

Above all else, Council members are aware that they are your representatives at the national level.

We will meet again on March 7 and 8, 1983 at CDA Headquarters in Ottawa. Take time to talk to your representative about the Council and its activities. Make your concerns known and your opinions felt.

The Council on Student Affairs provides dental students with a strong voice nationally. Since its inception, we have been involved in and are aware of, events and issues affecting dentistry across Canada.

With your support, interest and input, we will continue to represent you on issues of national concern to the profession.

* Alain Thivierge is the Chairman of the CDA Council on Student Affairs and a senior dental student at the Université de Montréal.

All inquiries to the Council can be directed either through your CDA Student Representative or to the Council on Student Affairs, care of the Canadian Dental Association, 1815 Alta Vista Drive, Ottawa, Ontario, K1G 3Y6, telephone (613) 523-1770.

Council's Next Meeting — March 7-8, 1983 in Ottawa

If you have any items you wish discussed, contact your CDA representative.

CDSPI Revises its Undergraduate Insurance Package

Undergraduates are eligible for up to \$50,000 of Basic Life Insurance coverage and \$50,000 of Accidental Death and Dismemberment coverage without evidence of health.

See your CDA representative or contact CDSPI at their new toll free number 1-800-268-5418.

Student Clinicians Sponsored to Attend CDA's 1983 Convention

Each dental school has been asked to choose a student clinician to participate in CDA's 1983 Convention in Vancouver, British Columbia.

The program is sponsored by Dentsply Canada Limited, and one student from each faculty is eligible for support.

Speak to your Dean or student rep for further information.

CDA's Annual Convention — September 25-28, 1983, Vancouver, B.C.

Registration is free to all CDA student members.

More Convention information will be published in the CDA Journal.

NDEB Certificate — Don't Miss the Deadline Date

Application forms for the NDEB Certificate have been individually addressed to each senior dental student and sent for distribution to the CDA student rep. Cost — \$265.00, deadline date — March 31, 1983.

For further information, see your CDA rep or contact:

The National Dental Examining Board of Canada,
100 Bronson Avenue, Suite 807,
Ottawa, Ontario. K1R 6G8
Telephone: (613) 236-5912

Graduate Student Membership — \$12.00 Per Year

ATTENTION: Graduate Students

If you have proceeded directly from an undergraduate program to at least one full year of advanced study in an accredited school or hospital program, you are eligible for CDA student membership at \$12.00 per year.

See your CDA student representative for further details.

CDA's Resource Centre Picking Up Speed

CDA's resource centre is busier than ever! If you require a computer search on a dental topic, copies of select periodical literature or information on where to obtain certain material, contact the CDA Librarian. The service is fast and economical, too.

1983 Teaching Conference on Practice Administration

Faculty from each Canadian dental school will meet in Vancouver next September to discuss the teaching of practice administration.

The Teaching Conference is an annual event sponsored by the Canadian Fund for Dental Education and organized by the CDA and the Association of Canadian Faculties of Dentistry.

ODA Publication — A Study of the Future

The Ontario Dental Association has recently published an informative book entitled "The Changing Dental Profession, New Directions for Practice in the 80's and Beyond". Anyone wanting a copy should contact the ODA, 234 St. George Street, Toronto, Ontario, M5R 2P1 — price \$3.00. (CDA/ODA student members get one free)

If you have a question about the Canadian Dental Association, call — collect (613) 523-1770.



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

MEMBERSHIP '83

November 3, 1982

Dear Colleague:

We have enclosed your invoice for your 1983 membership in the Canadian Dental Association and we urge you most sincerely to renew that membership today.

In asking you to renew and maintain your support of your national organization we believe you recognize the importance of membership strength from coast to coast.

Dentistry is facing difficulties in many areas: increasing government interference, manpower problems and the current economic situation. Some members will react to the current crises by not paying their dues, in other words failing to carry their share of the load. We ask you also to persuade your colleagues to support their national association because it is facing the issues first hand and on every front.

As a result of a strong lobby mounted by CDA the Federal government just recently withdrew its proposal to tax dental premiums paid by employers. This lobby was initiated immediately following the introduction of the proposed tax measure in the November 1981 budget. Dentists across Canada were asked to write or call their member of parliament to protest the tax measure. A series of briefs were presented to Parties and Committees on Parliament Hill, the most recent being an 18-page submission to the Standing Committee on Finance, Trade and Economic Affairs. The brief was copied to all Cabinet Ministers including the Minister of Health and Welfare and every member of parliament.

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In order to continue to be successful, CDA must represent a commitment by the entire profession. As you are no doubt aware, it is the total numbers represented in a lobby to government that influences parliamentarians - therefore the CDA needs to represent all members of the dental profession in Canada to ensure maximum effect.

Upon learning that Revenue Canada is currently auditing a number of professional management companies, the Association quickly issued a Communiqué detailing what such an audit involved and advice as to how to cope with it.

The Association is also addressing the dental manpower supply problem with a comprehensive nation-wide study well underway. The completed report is expected this fall with recommendations for action.

Educational programs, various publications including the Journal and health education pamphlets and a first rate accreditation process are among other services provided by CDA.

I have instituted a new program whereby I have set aside four days throughout the year when you may call me collect to discuss any affairs related to the Association. The first "Call the President Day" is November 23, 1982.

Please be good enough to return the enclosed membership invoice and be among those who lead CDA through the challenging '80's.

Thank you.

Yours sincerely,

A handwritten signature in dark ink, appearing to read "William R. Thompson". The signature is fluid and cursive, with a large, stylized "W" and "T".

W.R. Thompson
President

ROUTEMENT 1983



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

1e 3 novembre, 1982

Cher membre de la profession,

Le temps est venu de renouveler votre adhésion à l'Association dentaire canadienne et c'est pourquoi nous vous envoyons votre avis de cotisation pour l'année 1983. Nous vous exhortons fortement à agir sans délai.

En vous demandant de donner à nouveau votre appui à votre organisation nationale, nous croyons que vous reconnaissez l'importance d'une association qui soit forte d'un océan à l'autre.

Actuellement, la dentisterie doit faire face à des difficultés dans plusieurs domaines comme l'ingérence croissante du gouvernement, les problèmes de main-d'oeuvre et le sombre climat économique. Certains membres voudront parer à la crise actuelle en ne payant pas leur cotisation. Ce faisant, ils refuseront d'assumer leur part des responsabilités. Aussi vous prions-nous d'inciter vos collègues à appuyer leur association nationale. En effet, celle-ci s'occupe de chercher des solutions pratiques à tous les problèmes qui se présentent.

Justement, l'ADC vient de résoudre un de ces problèmes et de remporter une importante victoire. A la suite de pressions que l'association a exercées, le gouvernement fédéral a décidé de retirer une proposition visant à taxer les régimes d'assurance dentaire défrayés par les employeurs. L'ADC a commencé à protester immédiatement après la présentation du budget de novembre 1981 qui préconisait une telle mesure. Elle a d'abord demandé à tous les dentistes du pays d'écrire à leur député ou de lui téléphoner pour manifester leur opposition. Ensuite, elle a préparé des mémoires qu'elle a présentés aux partis et comités du Parlement, le plus récent de ces mémoires étant un document de 18 pages soumis au Comité permanent des Finances, du commerce et des questions économiques. Le même mémoire a été adressé à tous les ministres du cabinet, y compris celui de Santé et Bien-être social Canada, et à tous les membres du Parlement.

.../2

Afin de continuer à remporter des succès, l'ADC doit représenter la profession tout entière. Autrement dit, tous les membres de la profession doivent signifier leur engagement. Comme vous le savez sans doute, c'est l'importance du nombre des gens exerçant des pressions qui influence les parlementaires. C'est pourquoi l'ADC a besoin de représenter tous les membres de la profession dentaire au Canada afin de s'assurer un pouvoir d'influence maximal.

Par ailleurs, en apprenant que Revenu Canada était à vérifier les dossiers d'un certain nombre de sociétés de gestion professionnelle, l'ADC s'est empressée d'émettre un communiqué indiquant de façon précise ce qu'entraîne une telle vérification et donnant des conseils sur les dispositions à prendre en pareil cas.

En outre, l'ADC est en train de s'occuper du problème de la main-d'oeuvre dentaire en menant une étude complète à travers tout le pays. Le projet est déjà fort avancé et on prévoit en obtenir un rapport dès cet automne ainsi que des recommandations sur les mesures à prendre.

Parmi les nombreux services rendus par l'ADC, rappelons les programmes éducatifs, diverses publications -- dont le Journal mensuel et des brochures d'hygiène à l'intention du public -- et un excellent programme d'agrément pour les écoles dentaires et les hôpitaux.

A ces services habituels, j'en ai ajouté un autre. Durant mon mandat, il y aura quatre journées au cours desquelles vous pourrez m'appeler (à frais virés) pour aborder toute question ayant trait à l'ADC. La première de ces journées sera le 23 novembre prochain.

Ayez donc l'obligeance de retourner le formulaire d'adhésion ci-joint et faites-vous un devoir de compter parmi ceux qui aideront l'ADC à relever les défis de la présente décennie.

Je vous remercie à l'avance de votre appui et vous prie de recevoir mes sincères salutations.



Le président,
(W.R. Thompson)

NON-MEMBERS



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

MEMBERSHIP '83

November 3, 1982

Dear Colleague:

Our records indicate that you are not a member of the Canadian Dental Association and we would like you to reconsider your commitment to organized dentistry.

We have enclosed a membership invoice and urge you to support your national organization to ensure nation-wide unity within the profession.

Dentistry is facing difficult days ahead with increasing government interference, manpower problems and the current economic situation. But with your support, these difficulties will continue to be met and dealt with directly.

As the result of a strong lobby mounted by CDA the Federal government just recently withdrew its proposal to tax dental premiums paid by employers. This lobby was initiated immediately following the introduction of the proposed tax measure in the November 1981 budget. Dentists across Canada were asked to write or call their member of parliament to protest the tax measure. A series of briefs were presented to Parties and Committees on Parliament Hill, the most recent being an 18-page submission to the Standing Committee on Finance, Trade and Economic Affairs. The brief was copied to all Cabinet Ministers including the Minister of Health and Welfare and every member of parliament.

In order to continue to be successful, CDA must represent a commitment by the entire profession. As you are no doubt aware, it is the total numbers represented in a lobby to government that influences parliamentarians - therefore the CDA needs to represent all members of the dental profession in Canada to ensure maximum effect.

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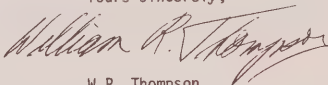
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Thank you.

Yours sincerely,

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W.R. Thompson
President

ROUTEMENT 1983



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

1e 3 novembre, 1982

Cher membre de la profession,

Nos dossiers indiquent que vous n'êtes pas membre de l'Association dentaire canadienne. Nous vous invitons à examiner à nouveau vos idées à l'égard de votre organisation professionnelle nationale.

Vous trouverez donc ci-joint un avis de cotisation. Nous vous exhortons très fortement à appuyer une organisation dont le but est d'assurer que la profession dentaire soit unie dans le pays tout entier.

A cause de l'ingérence croissante du gouvernement, des problèmes de main-d'oeuvre et de la situation économique actuelle, l'avenir s'annonce difficile pour la dentisterie. Avec votre appui, cependant, il nous sera possible de continuer à nous occuper directement de ces problèmes et à leur trouver des solutions.

Justement, l'ADC vient de résoudre un de ces problèmes et de remporter une importante victoire. A la suite de pressions que l'association a exercées, le gouvernement fédéral a décidé de retirer une proposition visant à taxer les régimes d'assurance dentaire défrayés par les employeurs. L'ADC a commencé à protester immédiatement après la présentation du budget de novembre 1981 qui préconisait une telle mesure. Elle a d'abord demandé à tous les dentistes du pays d'écrire à leur député ou de lui téléphoner pour manifester leur opposition. Ensuite, elle a préparé des mémoires qu'elle a présentés aux partis et comités du Parlement, le plus récent de ces mémoires étant un document de 18 pages soumis au Comité permanent des Finances, du commerce et des questions économiques. Le même mémoire a été adressé à tous les ministres du cabinet, y compris celui de Santé et Bien-être social Canada, et à tous les membres du Parlement.

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Quant au problème de la main-d'oeuvre, l'ADC est en train de mener une étude complète à ce sujet. Le projet est d'ailleurs déjà bien avancé et on prévoit en obtenir un rapport dès cet automne ainsi que des recommandations appropriées sur les mesures à prendre.

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Je vous remercie à l'avance de votre appui et vous prie de recevoir mes sincères salutations.



Le président
(W.R. Thompson)

ASSOCIATE MEMBER



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6

TELEPHONE (613) 523-1770

Dear Associate Member,

Associate member status is granted on a yearly basis to dentists who have graduated from a Canadian dental faculty and who are currently non-licensed as follows, to:

- a) Retired dentists;
- b) Members who have gone abroad to work or study and who wish to maintain a CDA membership;
- c) Members who are not practising due to a return to post-graduate studies at some time after obtaining their license;
- d) Members who apply under mitigating circumstances for personal reasons, i.e. illness, semi-retired, etc.

Periodically it is necessary to verify our records and the continued eligibility of Associate members. Please fill in the appropriate areas on the form below and return to us with your membership application.

I wish continued Associate member status for the following reasons:

- ☐ Retired/non-Licensed.
- ☐ Attending post-graduate studies program _____
Year of graduation _____
- ☐ Non-licensed in Canada/Graduated from _____
- ☐ Other reasons / mitigating circumstances
Please explain _____



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

1e 3 novembre, 1982

Cher membre associé,

Le titre de membre associé est accordé annuellement au dentiste qui a reçu son diplôme d'une école dentaire canadienne, mais qui, présentement, n'est pas considéré comme un dentiste à part entière pour l'une des raisons suivantes:

- a) il est un dentiste à la retraite;
- b) il est un membre qui se rend à l'étranger pour y travailler ou y étudier et qui désire rester membre de l'ADC;
- c) il est un membre qui n'exerce pas parce qu'il entreprend des études supérieures quelque temps après l'obtention de son diplôme;
- d) il est un membre qui désire s'inscrire en vertu de circonstances atténuantes, pour des raisons personnelles comme la maladie, la retraite partielle, etc.

Périodiquement, il est nécessaire pour l'ADC de vérifier ses dossiers et l'admissibilité des membres. Veuillez donc remplir les endroits appropriés du formulaire ci-dessous et retourner celui-ci avec votre demande d'adhésion.

Je désire conserver le titre de membre associé de l'ADC pour les raisons suivantes:

- ☐ retraité(e)/non diplômé(e).
- ☐ étudiant(e) au niveau supérieur en _____
année de l'obtention du diplôme _____
- ☐ non diplômé(e) au Canada/diplômé(e) de _____
- ☐ autres raisons/circonstances atténuantes

Veuillez préciser _____

NEW GRADUATES



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6

TELEPHONE (613) 523-1770

MEMBERSHIP '83

November 3, 1982

Dear Colleague:

For the first time you are being invoiced by the Canadian Dental Association as a member of your profession and asked to assume your responsibility in organized dentistry.

By maintaining your four-year relationship with CDA throughout your undergraduate years, you have been granted full membership status without cost until the end of 1982.

Recognizing the current economic climate, the cost of practice, and those other necessities required to launch a career, the CDA Board of Governors has agreed that graduates who have qualified for the student graduate package may pay their CDA membership fee in two equal installments in the first year following student membership status. It means that the first payment is due January 1, 1983 and the second payment June 1, 1983. We urge you to take advantage of this special consideration.

The Canadian Dental Association has never been more active in government relations, as government becomes increasingly involved in our daily lives. As a result of a strong lobby mounted by CDA the Federal government just recently withdrew its proposal to tax dental premiums paid by employers. This lobby was initiated immediately following the introduction of the proposed tax measure in the November 1981 budget. Dentists across Canada were asked to write or call their member of parliament to protest the tax measure. A series of briefs were presented to Parties and Committees on Parliament Hill, the most recent being an 18-page submission to the Standing Committee on Finance, Trade and Economic Affairs. The brief was copied to all Cabinet Ministers including the Minister of Health and Welfare and every member of parliament.

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In order to continue to be successful, CDA must represent a commitment by the entire profession. As you are no doubt aware, it is the total numbers represented in a lobby to government that influences parliamentarians - therefore the CDA needs to represent all members of the dental profession in Canada to ensure maximum effect.

The Association is addressing the dental manpower problem with a comprehensive nation-wide study which is well underway. The completed report is expected this fall with recommendations for action.

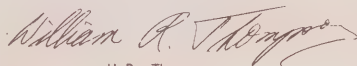
Your student package provided you with samples, and a list of the many CDA membership services available to you. I have instituted a new program whereby I have set aside four days throughout the year when you may call me collect to discuss any affairs related to the Association. The first "Call the President Day" is November 23, 1982.

May I ask you to join your colleagues so that we can stand together within the CDA membership fold to collectively face the decade of the '80's.

Please return the enclosed invoice with half or all your membership dues, so that we can continue to protect your best interests.

Thank you.

Yours sincerely,

A handwritten signature in cursive script, reading "William R. Thompson".

W.R. Thompson
President

R.B.

If you have proceeded directly from an undergraduate dental program to a graduate or post-graduate school, you continue to be eligible for the student membership fee.

TRUITEMENT 1983



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
2815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

1e 3 novembre, 1982

Cher membre de la profession,

Pour la première fois depuis l'obtention de votre diplôme, l'Association dentaire canadienne vient solliciter votre appui comme membre de la profession en vous demandant de continuer à vous joindre à elle et à assumer les responsabilités que vous avez envers votre organisation professionnelle.

Déjà, au cours de vos quatre années d'études en dentisterie, vous avez été membre étudiant de l'ADC, ce qui vous a donné droit d'en être membre à titre gracieux jusqu'à la fin de l'année 1982.

Etant donné le climat économique actuel ainsi que les dépenses que suscite un nouveau cabinet et les autres exigences qu'impose le lancement d'une carrière, le Conseil d'administration de l'ADC a décidé que les diplômés qui se sont qualifiés pour l'ensemble des avantages leur étant consentis, peuvent payer leurs frais de cotisation en deux versements égaux la première année suivant l'obtention de leur diplôme. C'est donc dire qu'ils peuvent effectuer le premier versement le 1er janvier 1983 et le second, le 1er juin suivant. Il va sans dire que nous vous exhortons à profiter de cet avantage.

Jamais auparavant l'Association dentaire canadienne n'a été aussi préoccupée des rapports gouvernementaux que maintenant, le gouvernement s'ingérant toujours davantage dans la vie quotidienne des citoyens. A ce propos, l'ADC vient tout juste de remporter une importante victoire. A la suite de pressions qu'elle a exercées, le gouvernement fédéral a décidé de retirer une proposition visant à taxer les régimes d'assurance dentaire défrayés par les employeurs. L'ADC a commencé à protester immédiatement après la présentation du budget de novembre 1981 qui préconisait une telle mesure. Elle a d'abord demandé à tous les dentistes du pays d'écrire à leur député ou de lui téléphoner pour manifester leur opposition. Ensuite, elle a préparé des mémoires qu'elle a présentés aux partis et comités du Parlement, le plus récent de ces mémoires étant un document de 18 pages soumis au Comité permanent des Finances, du commerce et des questions économiques. Le même mémoire a été adressé à tous les ministres du cabinet, y compris celui de Santé et Bien-être social Canada, et à tous les membres du Parlement.

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Afin de continuer à remporter des succès, l'ADC doit représenter la profession tout entière. Autrement dit, tous les membres de la profession doivent signifier leur engagement. Comme vous le savez sans doute, c'est l'importance du nombre des gens exerçant des pressions qui influence les parlementaires. C'est pourquoi l'ADC a besoin de représenter tous les membres de la profession dentaire au Canada afin de s'assurer un pouvoir d'influence maximal.

Par ailleurs, l'ADC est en train de mener une étude complète touchant les effectifs dentaires au Canada. Le projet est déjà fort avancé et on prévoit en obtenir un rapport dès cet automne ainsi que des recommandations appropriées sur les mesures à prendre.

L'ensemble des pièces qu'on vous a remis quand vous étiez étudiant(e) vous donnait des exemples et vous fournissait une liste des services que l'ADC rend à ses membres. A ces services s'en ajoute un nouveau. Durant mon mandat, j'ai réservé quatre journées au cours desquelles vous pourrez m'appeler (à frais virés) pour aborder des questions ayant trait à l'association. La première de ces journées sera le 23 novembre prochain.

Puis-je compter que vous vous joindrez à vos collègues afin que, tous ensemble, les membres de l'ADC relèvent les défis de la présente décennie?

Si tel est le cas, veuillez retourner votre avis de cotisation avec le paiement de la moitié ou de la totalité des frais, de manière à ce que l'ADC puisse continuer à défendre vos meilleurs intérêts.

Je vous remercie à l'avance de votre appui et vous prie de recevoir mes sincères salutations.



Le président
(W.R. Thompson)

N.B.: Si, après l'obtention de votre diplôme, vous avez entrepris des études supérieures, vous restez admissible au titre de membre étudiant et devez acquitter les frais de cotisation en conséquence.

MAJOR CDA PUBLICATIONS AVAILABLE

- Uniform System of Codes and List of Services
- Code of Ethics
- Manual — Policies on Dental Prepaid Insurance
- Manpower Supply Report
- Manual on Fluoridation in the Community
- Dental Health of Canadians — a Perspective

**CDA
MEMBER SERVICES
&
PROGRAMS**

**Enquiries about Member Services
Call (613) 523-1770 Collect**

1815 Alta Vista Drive, Ottawa, Ontario K1G 3Y6



The 1980's with its escalating economic, political and social changes demand a powerful national organization to act on behalf of ALL dentists across Canada. That is the role of the Canadian Dental Association.

Pride of profession is no mere rhetoric. It is the essence of building a strong national organization to safeguard your interests.

You strengthen the profession you have chosen when you join the Canadian Dental Association.

ACCOMPLISHMENTS 1982

- Extensive monitoring of government action
- Appointment of a joint professional committee (legal, medical and accounting) to improve RRSP provisions
- Major lobby to remove the tax on dental plans
- Reduction of tariffs on dental materials
- Commissioned a national Manpower Study
- Investigation of Federal Government audits in dental practices
- Liaison with Health & Welfare
 - Bureau of Dangerous Drugs
 - Hepatitis B Guidelines
- Development of a National Dental Resource Centre

SERVICES AND PROGRAMS

- Educational Pamphlets
- Comprehensive Insurance Through CDSPI
- Monthly Journal
- Accreditation — Dental Programs
 - Hospital Dental Services
- Education — Dental Admissions Testing
 - Continuing Education
- Annual Convention — Scientific & Social
- Seal of Approval for Dentifrices & Mouthrinses
- Student Services
- Film Services

FUTURE PROJECTIONS 1983

- Develop major educational programs to increase dental awareness
- Develop a certification program with CSA to improve standards of dental materials
- Monitor occupational health hazards in dental practices
- Examine the feasibility of a survey of Dental Practice
- Review the proposed Canada Health Act

NOS PRINCIPALES PUBLICATIONS

- Système uniformisé de codification et liste des services
- Code d'éthique
- Principes directeurs de l'ADC en matière de régimes d'assurance dentaire et guide sur la manière de remplir les formulaires de réclamation dentaire
- Étude des ressources en personnel — Main-d'oeuvre au Canada
- La fluoruration
- La santé dentaire chez les Canadiens — Perspective

L'ADC SERVICES ET ACTIVITÉS

Renseignements sur le service des membres
(613) 523-1770 — Faites virer les frais

1815, Promenade Alta Vista, Ottawa
(Ontario) K1G 3Y6



En ces années 80, marquées de profonds changements économiques, politiques et sociaux, les dentistes du Canada ont besoin d'une organisation nationale forte, capable d'agir au nom de TOUS. Cette mission incombe à l'Association dentaire canadienne.

Sans fleur de style, c'est grâce à la fierté professionnelle qu'on arrive à bâtir une organisation nationale forte pour veiller aux intérêts de tous et chacun.

En joignant les rangs de l'Association dentaire canadienne, c'est à votre propre profession que vous donnez plus de poids.

SERVICES ET ACTIVITÉS

- Brochures éducatives
- Régime d'assurance complet (CDSPI)
- Journal mensuel
- Agrément — Programmes d'enseignement
 - Services hospitaliers
- Formation — Test d'admission
 - Formation continue
- Congrès annuel — Activités scientifiques
 - et sociales
- Recommandation de dentifrices et de rinçage-bouche
- Service des étudiants
- Filmathèque

CETTE ANNÉE, L'ADC A . . .

- surveillé de près les activités du gouvernement
- préparé, en collaboration avec d'autres professions, (droit, médecine et comptabilité) un mémoire conjoint sur les moyens d'améliorer les REER
- exercé des pressions assidues pour soustraire les régimes d'assurance dentaire de l'impôt
- fait réduire les frais de douane sur les matériaux dentaires
- fait une étude nationale des ressources en personnel — Main-d'oeuvre au Canada
- surveillé les vérifications du gouvernement fédéral dans les cabinets de dentiste
- surveillé les activités de Santé et Bien-être
 - Bureau des narcotiques
 - Hépatite B
- mis sur pied un centre national de documentation

POUR L'ANNÉE 1983, L'ADC PRÉVOIT . . .

- établir un vaste programme d'éducation publique pour sensibiliser davantage la population
- mettre au point un programme de certification des matériaux dentaires pour en améliorer la qualité
- examiner les risques pour la santé dans la pratique professionnelle
- examiner la possibilité de faire une étude de la pratique de la médecine dentaire, y compris le coût des soins dentaires
- examiner le projet de législation sur la santé au Canada

APPENDIX D

1983 MEMBERSHIP
AS AT FEBRUARY 4, 1983

	<u>ONTARIO</u>	<u>QUEBEC</u>	<u>OTHER</u>	<u>TOTALS</u>
ACTIVE & AFFILIATE	2,424	1,026	10	3,460
ASSOCIATE	75	43	58	176
TOTALS	<u>2,499</u>	<u>1,069</u>	<u>68</u>	<u>3,636</u>
WEEK NO: 12				

1982 MEMBERSHIP
REPORTED AT WEEK NO: 12

ACTIVE & AFFILIATE	2,288	1,084	12	3,385
ASSOCIATE	73	29	54	156
TOTALS	<u>2,361</u>	<u>1,113</u>	<u>67</u>	<u>3,541</u>

1981 TOTALS:	2,586	1,240		
1982 TOTALS:	2,495	1,277		

CANADIAN DENTAL ASSOCIATION

LIFE MEMBERS

The following Dentists have been granted Life Membership by the Executive Council:

<u>NAME</u>	<u>PROVINCE</u>	<u>YEAR OF BIRTH</u>	<u>YEAR OF GRADUATION</u>
DOHAN, M.J.T.	B.C.	1917	1940
MOSCOVICH, S.R.	B.C.	1917	1944
UPTON, W.R.	B.C.	1917	1942
MACDIARMID, J.E.	SASK.	1917	1950
MCLEOD, H.I.	SASK.		1951
REID, R.	SASK.		1939
JACKSON, M.	ONTARIO	1916	1950
WEILER, S.W.	ONTARIO	1917	1941
BEAULIEU, G.	QUEBEC	1918	1944
RAYMOND, G.	QUEBEC	1917	
BIGELOW, J.A.	ONTARIO	1918	1942
GRANT, V.	ONTARIO	1918	1945
BOOKHALTER, B.	SASK.		1939
HEWITT, W.H.	SASK.	1918	1950
GRAY, A.R.S.	ALTA.	1920	1943
HAUCK, O.S.	ALTA.	1918	1943
JANZEN, J.N.	ALTA.	1917	1943

TAXATION COMMITTEE REPORT

March 4, 1983

Members: Dr. Robert Hicks, Chairman
Dr. W.R. Thompson
Dr. D.E. Williams

1. Professional Management Companies

Since the last meeting of the Board of Governors, the Taxation Committee has been actively pursuing a number of issues that relate to the taxation of dentists and their dental practices in Canada.

Relative to professionals, the major focus of the taxation arm of the Federal Government has been centred on professional management companies. Through a major change in Revenue Canada's interpretation of "reasonable charges" by professional management companies and through proposed amendments to the Income Tax Act (Bill C-139), the Federal Government appears to be working towards the elimination of professional management companies as viable business entities in our country.

Unfortunately, the dental profession has been singled out by Revenue Canada in order to enforce its new professional management companies interpretations through many audits of dental practices and their management companies in the province of Ontario.

CDA's Taxation Committee has had two meetings with senior officials of Revenue Canada in order to convince them that their basis of assessment is not valid. While our arguments are sound and supported by evidence, to date Revenue Canada has not announced a change in their interpretation.

Your Taxation Committee has:

- a) surveyed our members for information;
- b) provided our members with information on the rationale of Revenue Canada's position;
- c) informed our members of the procedures to be followed in the event of a Revenue Canada audit;
- d) provided members with the reason and logic of CDA's opposition to Revenue Canada's position.

.../2

Professional Management Companies - continued

Attached to this report are the CDA Communiqués which detail the foregoing information.

With regard to Bill C-139, a specific amendment provides a definition for "personal service corporations", and this item may qualify many professional management companies from lower rates of taxation as corporate entities. In the past, professional management companies have been treated separately from one or two employee "executive-type" personal service corporations. If Bill C-139 is passed, many professional management companies will be disqualified from lower rates of taxation because they will be defined as "personal service corporations".

The special report on Bill C-139 to our members is attached herewith. A brief has been submitted by the President of the CDA to the Minister of Finance, outlining CDA's opposition to the broad effect of Bill C-139 and a copy of this brief is also attached.

2. Duty on Imported Gold Used in Dental Treatment

Revenue Canada Customs have recently changed their interpretation for the application of duty on imported gold used for dental treatment. Previously, this type of gold entered Canada without the application of duty. Customs has now decided that this is "manufactured metal" and therefore duty will be applied (approximately 5-6%).

A similar composition of gold used in the manufacture of jewelry will remain duty-free. Ho-hum -- here we go again! While the amount of duty applied is not large, the principle involved is significant. CDA is preparing a letter to be sent to the Minister of Finance detailing the inequity of this new ruling.

3. Pre-Tax Retirement Savings Contributions

The joint professional committee working on preparing a brief, recommending improvement in avenues available for self-employed taxpayers to provide for retirement or pension income, has encountered a slight set-back. It has been necessary to change legal advisors in mid-stream and therefore a delay in presenting our brief to the Minister of Finance has taken place. However, the climate is improving with time for acceptance of our proposals and we anticipate a more positive report at the next meeting of the Board.

.../3

- 3 -

Taxation Committee Report - continued

CDA's Taxation Committee has been extremely active in the past few months due to many major changes in the Federal Government's taxation policies involving professionals in Canada. We will continue to act and also keep our membership informed on these important issues.

Respectfully submitted

Robert Hicks, DDS, MSc.
Chairman

IMPORTANT

The CDA Taxation Committee is gathering general information on professional Management Companies in its effort to convince Revenue Canada that overall profits generated by such companies in dental practices are "reasonable".

If you retain a professional Management Company in your dental practice, we would greatly appreciate you answering a few questions listed below and returning your answer immediately to CDA Headquarters.

The information you provide will assist your Taxation Committee in its attempt to maintain the financial viability of Management Companies.

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Do you or any of your family have a share interest in the Management Company? | ☐ | ☐ |
| 2. Do you retain an individual Management Company (i.e. one in which neither you or your family have a share interest?) | ☐ | ☐ |

If so, please advise how we can contact them

Company Name _____

Address _____

Telephone _____

Name of principal contact in this company _____

- | | | |
|--|--------------------------|--------------------------|
| 3. Have you been contacted by Revenue Canada within the last 3 years and questioned on Management Company charges? | ☐ | ☐ |
| 4. Would you be prepared to forward to the CDA Taxation Committee, information related to any such audit if requested? | ☐ | ☐ |

- All information obtained would be Confidential and used only for Committee purposes.

Your Name _____

Address _____

Telephone _____

Please mail to:

Canadian Dental Association
Taxation Committee
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Thank you.



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

OCTOBER, 1982

CALL THE PRESIDENT



Dr. W.R. Thompson

CDA President Dr. W.R. Thompson has set aside four days in which he invites your calls at CDA Headquarters in Ottawa. "Call the President" days are scheduled for:

November 23, 1982
February 15, 1983
April 19, 1983
June 7, 1983

Dr. Thompson is making this time available to improve personal communications with the president of the Canadian Dental Association in order that CDA members may express opinions, recommend improvements or seek an update on a specific issue. In order to take as many calls as possible Dr. Thompson has expressed the desire that, if possible, the calls be limited to one issue and a maximum of five minutes.

To call the President collect on any of the above specified days dial area code (613) 523-1770 and ask for Dr. W.R. Thompson during the regular CDA office hours 8:30 a.m. to 4:30 p.m. eastern standard time.

CAUTION! PROFESSIONAL MANAGEMENT COMPANIES AND REASONABLENESS OF CHARGES

David I. Matheson, Q.C.

The Canadian Dental Association has over the past several months been monitoring audits by the tax department in respect of management fee charges imposed by professional management companies on dentists. The Association is aware of a number of cases in which the tax department has been disallowing the deduction by dentists of some of these management fees on the basis that the amount of the fees is unreasonable, notwithstanding the fact that the amount was established within what were thought to be acceptable limits until recently. The CDA tax committee has been systematically following up this tax audit practice of some district offices of Revenue Canada to determine what in fact is being done and what should be done by dentists and professional management companies on this issue.

Recently tax committee chairman, Dr. Robert N. Hicks, and CDA's tax consultant met in Ottawa with officials from Revenue Canada to determine what the tax department's current overall policy is on this subject.

The purpose of this communiqué is to inform members of the profession of some of the tax principles involved, the tax department's policy on the subject, the application in some instances of the policy and some of the things members might consider doing in the event that they are subject to a tax audit.

Earlier this year, CDA reported what was happening and what was considered to be a reasonable approach in dealing with the tax department on management fees in the February 1982 edition of the Journal. Very little has changed since that report

other than an increase in the number of reported audits and disputes. In view of the increase, the views expressed in that article merit repeating.

The Income Tax Act provides that no deduction may be made in respect of any expense unless it is for the purpose of earning income from the dentist's business and then only to the extent that the account is reasonable in the circumstances. Revenue Canada acknowledges this in their Interpretation Bulletin No. IT-189, dated November 25, 1974. This Bulletin says that a company is entitled to a reasonable profit for services it provides and that deductions of amounts paid to a company by a practitioner who is the recipient of such services are allowed, provided that the charges for the services are "reasonable in relation to the amount someone else would pay in a free market" for the same services.

Despite this statement, in some instances of which we are aware, it appears that Revenue Canada has taken an arbitrary approach which may be inconsistent with the basic statement.

The key word in this entire issue is "reasonable"!

In our recent meeting with Revenue Canada it was suggested that the tax department might look to the overall charge made by a management company to a dentist and the overall reasonableness thereof rather than trying to segregate and itemize charges on a classification basis. For example, in some instances tax assessors are saying that a management company cannot reasonably charge a fee of 15 per cent of the amount of a hydro bill, say \$100.00, which is paid by the management

company subject to reimbursement. It appears that a number of management companies over the years have had a fee formula which in essence totals up the amounts of the bills paid by them on behalf of the practitioners, and for which they are reimbursed, and adds a 15 per cent markup thereon for the services rendered in administering, recording and paying such bills.

Incidentally, Revenue Canada has used as a rule of thumb for several years a cost plus 15 per cent approach as a method of determining a reasonable service fee for personal services rendered by management companies. Cost in this context is the direct and overhead cost to the management company and does not include the amounts of items to be reimbursed by the professional such as the amount of his hydro bill and other bills. The 15 per cent markup measure was found to be reasonable in a case in the Federal Court of Canada several years ago. This is not to say that a higher markup may not be reasonable in circumstances different from that found in such a case.

The tax department's position is that the "value of the service", such as the cost of the time, supplies and overhead items expended in paying say a hydro bill, should be the basis of the service markup, not for example, the amount of the reimbursement bills such as hydro bills themselves. There is some merit in this position if you look at it in isolation. However, in a number of instances the tax department has been reluctant to step back and apply the "value for service" test on an overall charge basis, rather than the item by item basis generally used by them. Reasonableness ought to be determined in the context of the overall amount of the fee having regard for services rendered. The best test of this is not the method used to determine the markup on a particular bill but rather to ask what would be charged as an overall fee in arm's length management service situations.

The tax department has mentioned a number of concerns in this fee area. For example, they look to see if a 15 per cent markup on administrative staff costs are duplicated to some extent by additional 15 per cent markups on reimbursable bills paid for by the management company on behalf of the dentist, keeping in mind that the function of looking after such payment is

carried on by the same staff for which there may have already been a 15 per cent markup. The tax department also appears to be reluctant to add a 15 per cent markup to the cost of the management company providing professional associates or para-dental staff to the dentist when the dentist directly, in the open market, could be paying such personnel the same amount as the management company. This is perhaps ignoring the fact that the provision of these services by a management company eliminates administrative and detailed functions that would otherwise have had to have been carried on by the dentist.

If a dentist becomes involved with an audit in this area, it will be important for him and the management company to substantiate that the actual amount paid for the overall services rendered is equal to or less than the amount an arm's length management service company would charge in comparable circumstances. It is submitted that it is not the formula used by the management company to determine the fee charged that is the important determinant as to what is a reasonable fee. It is the overall charge for the complete service which is relevant in determining a reasonable charge has been made for services rendered.

It is interesting to note that in a spot check by your tax committee with arm's length providers of management services to professionals, we were told in some instances that a profit could not be made on the basis of a 15 per cent markup based on the reimbursable amount of bills paid on behalf of a dentist. It appears that some of such arm's length management companies would charge for services on a formula which would be based on a percentage of gross earnings by a professional, for instance 10 per cent of the gross income of the professional, and that normally the fee would exceed the fee charged on the basis of a 15 per cent markup on reimbursable amounts.

The tax department also indicated that another consideration in determining how large a fee can be charged is the investment and business risks taken by a management company in connection with its provision of services. If there are little or no investment and business risks incurred by the management company, it is suggested that it will be more difficult to substantiate certain markups which arm's length man-

agement service companies may charge. As well, the tax department further indicated that in comparing some arm's length fee structures, which in dollars involve a greater cost than what is being charged in non arm's length situations, it must be remembered that the services may be provided on a part time basis rather than on a full time basis and thus possibly justify a higher fee. This obviously is a contentious issue.

The tax authorities may be somewhat reluctant to revise their Interpretation Bulletin No. IT-189 to try and encompass the overall charge for the overall services test which we have described. They do not deny that there may be some merit in such a position in some instances. However, the factual situations under review can often vary quite substantially and thus they may feel that it would be difficult to set out in the Bulletin an overall rule of thumb such as proposed.

Tied in with all of this is the importance of structuring the contractual arrangements between a management company and the dentist so that the management company can reduce its taxable income if the dentist is forced by the tax department to reduce his deductible expense in respect of the service charged by the management company. It is important that the arrangements permit the management company to get a refund of taxes paid on fee income which it subsequently turns out is disallowed as a deduction to the dentist and taxed in his hands. For example, if only \$8,000.00 of a \$10,000.00 fee is allowed as a deduction, then the management company's income should somehow be reduced legally by \$2,000.00 and a tax refund sought. Where the tax department disallows a portion of any expense claimed by the dentist, it is important to consider what steps should be taken by the management company, even though no reassessments may have been made against it. What steps are appropriate will depend upon the circumstances of each case. CDA members should discuss this subject with their tax advisers.

It will be important for CDA to continue to monitor this situation and to make further submissions and proposals to the policymakers at Revenue Canada. Revenue Canada has been most co-operative in giving your tax committee the opportunity to provide submissions on these kinds of

issues and appreciates any constructive suggestions by the CDA.

Consequently, it is important that members continue to help CDA keep track of the various audits taking place on this fee issue. This will enable the CDA to continue its efforts to see that the assessing practices in various district tax offices are both fair and consistent across the country.

In conclusion, dentists should take a good hard look at what they are paying

their management companies for services rendered to make sure that they are reasonable and justifiable and that a good case can be made with the tax department in the event of any audit or assessment. If there are steps that can be taken to help rectify present or future arrangements, they should be taken now and in a manner that is not prejudicial to past arrangements. Not all cases will be winners, but there certainly are some good arguments available

in many instances to justify the reasonableness of management charges.

CDA members involved with audits on this subject are encouraged to keep their tax committee posted to the extent that their tax advisers feel appropriate so as to help substantiate the case being made by your tax committee to Revenue Canada on the subject of reasonable management fee arrangements.

TAX AUDITS AND ASSESSMENTS

David I. Matheson, Q.C.

As indicated by the accompanying article, a number of professional management companies, dentists and other professional groups will be subject to tax audits. This arises because professional management companies have had a high profile recently. There have been a number of legislative changes affecting them. As well, there has been a proliferation of the use of management companies over the past few years by professionals, executives, artists and athletes, and as a result there has been a constant catch up and review procedure carried on by the tax department on such companies. In particular, the tax department has been auditing management companies to determine whether approaches used by taxpayers are in their view acceptable. For example, the tax department looks to see if a company is a sham, whether fees are reasonable and so on.

With all of this activity, it is important that dentists, like any other taxpayers, clearly understand how to deal with such inquiries, audits and assessments by the tax department. As well, it is important that they act prudently and seek timely advice on how to proceed in the event of any such proceedings.

A taxpayer in these circumstances should immediately contact a knowledgeable tax practitioner the first instant an inquiry is made by the tax department on any item reported by him in his tax return or the tax return of a management company involved in his practice. Because of the complexity of our tax system, it is generally better for the taxpayer to have questions handled by the professionals who have prepared the tax return or other

qualified tax advisers. There is no substitute for experience in the tax area. Many questions that may be asked will no doubt involve some very technical tax and legal considerations and sometimes some rather foreboding implications, all of which may not be apparent to the taxpayer at first blush.

For example, assessors often inquire by way of general inquiries as to legal relationships between parties involved with management companies. If, for example, the relationship involves in some instances an employer-employee relationship rather than an independent contractor or consultant relationship between the provider and the recipient of services, then the tax treatment can be significantly different in each instance. There are literally hundreds of reported cases on the subject of such relationships. Often under review is the issue "What can a management company reasonably charge the user of its services?" This question carries with it a number of issues such as: -

- (a) What is permitted under the Income Tax Act?
- (b) What is happening as a general practice in arm's length situations?
- (c) What is the usual tax department treatment?
- (d) Does such treatment conform with the law?
- (e) What is the current policy of the department in this area?
- (f) Are there any changes in the wind?

This subject is covered in a separate report in this communiqué. This obviously illus-

trates that there are often significant implications in very routine questions being asked of a taxpayer by the tax department.

Incidentally, a taxpayer should not feel embarrassed or awkward with any tax department assessor in suggesting that he wishes to defer to his tax advisers who are more familiar with the tax aspects of his affairs. It is normal practice to do so, and the assessors know and appreciate this.

For the uninitiated, a tax audit usually starts with a computer report, a letter or a telephone call from the tax department inquiring on a particular item or items reported in a tax return. A request to do an audit of your records or the management company may ensue. The tax department will want to have an opportunity to discuss items with the taxpayer. It is then that he should seek advice from his tax adviser, not the tax department. He should only determine from the tax department what they specifically want to discuss. The tax department usually gives the taxpayer a reasonable period of time to respond. If the time is not adequate for him, they are usually co-operative in extending the time. Do not be hesitant to ask for more time. If the matter at issue is not resolved over a reasonable period of time, the tax department will issue an assessment.

Once the assessment is issued, the die is cast for more formal proceedings. The taxpayer must then file a notice of objection setting out the facts and reasons why there should be no assessment or a reduced assessment. Unfortunately, too often the tax advisers are retained only after the assessment is issued. If a taxpayer misses retaining tax advisers prior to the assess-

ment, it is critical that he retain their services to prepare his notice of objection and to counsel him on proceedings that follow.

The taxpayer should also watch out for the deadline to file the notice of objection (that is 90 days from the day of mailing of the assessment), and should not wait too long before contacting his tax adviser. The adviser usually needs plenty of time to gather the facts, consider the law and prepare the appeal. If the taxpayer misses the deadline, he cannot get a reprieve unless he can convince the Tax Review Board, a federal tax tribunal, that it would

be just and equitable to allow an extension. This is usually very difficult to obtain. The notice of objection should carefully set forth the taxpayer's case not only for review by the tax department but for purposes of laying a strong foundation for any possible appeal to the Tax Review Board, the Federal Court of Canada or ultimately the Supreme Court of Canada, if any such appeal is merited in the circumstances.

Care should also be taken in making sure that if a taxpayer in his personal return is being disallowed expenses charged by a management company and he is appealing,

then the management company should also take steps to try and keep its appeal rights open on the subject in case it might be entitled to a refund of tax if the taxpayer loses his appeal. There is a procedure whereby this can be done by having the management company file a waiver form with the tax department. Such a form should be done only for the subject of dispute and should not be a wide open waiver which would allow the tax department to open up anything else for the taxation year in question.

With all this in mind, proceed with care and seek the timely advice.

Canadian
Dental Association
Journal
de l'Association
Dentaire
Canadienne

Check the **November** Journal for . . .

- An examination of the dentist-to-population ratios in Saskatchewan.
- Evidence that Canada's fluoride shortage is now acute.

In **December**, watch for . . .

- The status of Hepatitis B vaccine in Canada.
- CDA executive director's report of the Board of Governors' annual meeting.



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

OFFICE OF THE PRESIDENT

February 16, 1983

The Honourable Marc Lalonde
Minister of Finance
House of Commons
Ottawa, Ontario
K1A 0A6

Dear Mr. Lalonde:

Re: Bill C-139 - Personal
Services Business

The Canadian Dental Association ("Association") is extremely disturbed with recent reports on the proposed application of the "personal services business" amendments to professional management companies. We recently wrote our members in this regard and enclose a copy of the text of that letter which was dated February, 1983.

The Association is the national organization for the dental profession representing approximately 9,000 dentists across Canada. We recently conducted a survey of our members on professional management companies. There are hundreds of such companies involved with our membership across Canada. The Association has made many representations over the past few years to your Government and your Department on the viability and acceptability of professional management companies, and we have been carefully monitoring the proposed amendments since November 12, 1981. At that time and until very recently the interested public was lead to believe that such amendments were intended only for incorporated executives and not for professional management companies.

If recent reports are accurate, such amendments will have a devastating effect on most professional management companies; and particularly those in which wives of professionals have played a key and expanding role. Most professional management companies in our profession have wives taking over significant management responsibilities and in doing so relieving the professional of management concerns and enabling him to render to the best of his abilities his professional services to the public.

.../2

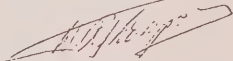
In many instances professionals have retained the services of wives' professional management companies to provide some of the services previously rendered by employees of the professionals; and all in a proper, fair and reasonable manner. Now, through an unduly broad legislative stroke your amendments appear to directly result in all wives who are trying to carry on such corporate service business being told that they cannot do so without being severely penalized, even though most other taxpayers can do so without such penalty.

There are many hundreds of companies across Canada in which wives of professionals are rendering services and to which your proposed amendments create severe and unfair hardship and discrimination. Surely you must perceive the real and direct inequitable discriminatory impact such amendments, if not revised, will have on wives in such situations, and the massive assessment and appeal implications and turmoil such amendments will create.

We urge you to reconsider such amendments so as to restrict them only to those situations which merit them. We also welcome the immediate opportunity to make further representations to you and your staff on these issues. We are also concerned that there may be a good deal of information and facts on these matters that may not have been brought to the attention of you and your staff. We are most anxious to make representation and to advance the matter with other professional and small business organizations.

We trust that a constructive and immediate review could be made on this matter and that we will be hearing from you shortly in this regard.

Sincerely yours,



William R. Thompson, D.D.S.
President

b.c.c. Taxation Committee
Dave Matheson

WRT/ssd
Encl.

IMPORTANT

Le Comité des questions fiscales de l'ADC recueille des renseignements généraux sur les sociétés de gestion professionnelle dans un effort pour convaincre Revenu Canada que l'ensemble des profits que ces sociétés suscitent dans les cabinets dentaires sont "raisonnables."

Si vous avez une société de gestion professionnelle pour votre cabinet dentaire, nous apprécierions que vous répondiez aux questions ci-dessous et que vous fassiez parvenir vos réponses immédiatement au siège social de l'ADC.

Les renseignements fournis aideront le Comité des questions fiscales dans sa tentative pour maintenir la viabilité financière des sociétés de gestion.

- | | OUI | NON |
|--|--------------------------|--------------------------|
| 1. Détenez-vous, vous-même ou un membre de votre famille, des actions dans une société de gestion? | ☐ | ☐ |
| 2. Avez-vous une société de gestion personnelle (c'est-à-dire une société dans laquelle vous-même ou votre famille détenez des actions)? | ☐ | ☐ |

Le cas échéant, veuillez indiquer comment on peut entrer en communication avec elle.

Nom de la société _____

Adresse _____

Téléphone _____

Nom du principal agent
de la société _____

- | | | |
|---|--------------------------|--------------------------|
| 3. Revenu Canada a-t-il communiqué avec vous au cours des trois dernières années et vous a-t-il interrogé au sujet des honoraires d'une société de gestion? | ☐ | ☐ |
| 4. Si on vous le demandait, seriez-vous disposé à faire parvenir au Comité des questions fiscales de l'ADC des renseignements touchant toute vérification? | ☐ | ☐ |

Tous les renseignements donnés seront confidentiels et utilisés uniquement à des fins servant le comité.

Nom _____

Adresse _____

Téléphone _____

Veuillez retourner ce questionnaire à:

L'Association dentaire canadienne
Le Comité des questions fiscales
1815, promenade Alta Vista
Ottawa (Ontario)
K1G 3Y6

Merci.



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

OCTOBRE, 1982

APPELEZ LE PRÉSIDENT



Dr W.R. Thompson

Le président de l'ADC, le Dr W.R. Thompson a réservé quatre journées de son mandat au cours desquelles il vous invite à lui téléphoner au siège social de l'ADC, à Ottawa. Ces quatre journées sont les suivantes:

le 23 novembre, 1982	le 19 avril, 1983
le 15 février, 1983	le 7 juin, 1983

Le Dr Thompson a eu cette idée pour favoriser les communications personnelles avec le président de l'Association dentaire canadienne. Les membres de l'ADC pourront ainsi exprimer leurs opinions, proposer des améliorations ou demander des éclaircissements sur des questions précises. Afin de permettre au Dr Thompson de recevoir le plus d'appels possible, on demande aux membres de se limiter, en autant que faire se peut, à un seul sujet et de ne pas prolonger la conversation au-delà de cinq minutes.

Vous pourrez téléphoner au président l'une des quatre journées indiquées ci-dessus, durant les heures régulières de bureau, soit de 8h 30 à 16h 30, heure normale de l'Est. Pour ce faire, vous composerez (613) 523-1770 en ayant soin de faire virer les frais et vous demanderez de parler au Dr W.R. Thompson.

ATTENTION ! LES SOCIÉTÉS DE GESTION PROFESSIONNELLE ET L'ÉQUITÉ DE LEURS HONORAIRES

David I. Matheson, Q.C.

Au cours des derniers mois, l'Association dentaire canadienne a examiné les vérifications faites par le Ministère de l'impôt touchant les honoraires que les sociétés de gestion professionnelle exigent des dentistes. Or, dans certains cas, l'ADC a pu voir que le Ministère de l'impôt n'a pas accepté que les honoraires de ces sociétés soient déductibles, les jugeant déraisonnables, et ce, bien que leur montant eût été établi à l'intérieur de ce que l'on croyait être, jusqu'à tout récemment, des limites acceptables. Le Comité des questions fiscales a étudié de façon systématique le procédé de vérification qu'utilisent certains bureaux régionaux de Revenu Canada, afin de déterminer ce qui, en réalité, est fait et devrait être fait par les dentistes et les sociétés de gestion professionnelle à ce sujet.

Récemment, le président du Comité des questions fiscales, le Dr Robert N. Hicks, et le conseiller fiscal de l'ADC ont rencontré, à Ottawa, des représentants de Revenu Canada pour savoir qu'elle est la politique générale actuelle du Ministère de l'impôt en cette matière.

L'objet de ce communiqué est de renseigner les membres de la profession sur quelques-uns des principes fiscaux en cause, de leur faire connaître la politique du Ministère de l'impôt sur le sujet en question, de leur donner quelques exemples d'application de cette politique et de leur conseiller ce qu'il convient de faire en cas de vérification fiscale.

Plus tôt cette année, dans le numéro de février 1982 de son Journal, l'ADC a donné un compte rendu de la situation,

indiquant ce qui était censé constituer un moyen raisonnable de traiter avec le Ministère de l'impôt touchant les frais de gestion. Depuis, il y a eu peu de changements, sauf qu'on a signalé un plus grand nombre de vérifications et de disputes. Aussi convient-il de répéter les idées exprimées dans le compte rendu de février.

En vertu de la Loi de l'impôt sur le revenu, aucune déduction ne peut être faite en fonction d'une dépense, à moins que ce ne soit dans le but d'obtenir un profit de l'exercice de la dentisterie, et alors, seulement dans la mesure où, suivant les circonstances, la dépense est jugée raisonnable. Revenu Canada reconnaît cette possibilité dans son Bulletin d'interprétation n° IT-189 du 25 novembre 1974. D'après ce bulletin, une société est en droit d'obtenir un profit raisonnable pour les services qu'elle rend et il est permis de déduire des revenus d'un praticien les sommes qu'il paie à une société pour recevoir de tels services, à la condition que les honoraires en paraissent « raisonnables relativement à la somme qu'une autre personne débourserait sur le marché libre » pour les mêmes services.

Malgré cette déclaration fondamentale, il semble, d'après certains cas portés à notre connaissance, que Revenu Canada ait adopté une attitude arbitraire qui peut le contredire.

Le mot-clé ici est « raisonnable ».

Lors de notre dernière rencontre avec Revenu Canada, on a proposé que le Ministère de l'impôt considère la totalité des honoraires versés par un dentiste à une société de gestion et détermine si, dans

l'ensemble, ils sont raisonnables au lieu de tenter de les détailler et de les classifier. Par exemple, les répartiteurs soutiennent, dans certains cas, qu'une société de gestion ne peut pas, raisonnablement, exiger 15 pour cent du montant d'un compte d'électricité — disons 100\$ — acquitté par la société de gestion et susceptible d'être remboursé. Il semble que, pendant plusieurs années, des sociétés de gestion aient eu comme principe général d'additionner les montants des factures qu'elles acquittaient au nom des praticiens — et pour lesquelles elles se faisaient rembourser — en majorant la somme obtenue de 15 pour cent pour couvrir le prix des services rendus et les frais d'administration.

Rappelons en passant que telle a été, pendant de nombreuses années, la règle appliquée de façon empirique par Revenu Canada qui jugeait raisonnable qu'une société exigeât 15 pour cent pour les services rendus. Dans ce cas, le montant comprend les dépenses directes ainsi que les frais généraux de la société de gestion et non les sommes que le professionnel doit rembourser à celle-ci, tels les montants des comptes d'électricité et des autres états de compte. Il y a quelques années, cette majoration de 15 pour cent a été jugée raisonnable dans un cas présenté à la Cour fédérale du Canada. Notons que, dans d'autres circonstances, une majoration plus grande pourrait être raisonnable également.

D'après Revenu Canada, c'est « le coût du service » — par exemple, le temps, le matériel de bureau et les frais généraux requis pour acquitter un compte d'électricité — qui doit servir de base pour en déterminer la valeur et non le montant des états de compte mêmes. Cette idée se défend dans certains cas isolés. Toutefois, dans plusieurs autres, le Ministère de l'impôt s'est montré peu disposé à reculer et à appliquer le principe du « coût du service » de façon générale plutôt que de façon détaillée suivant son habitude. Pour déterminer si les dépenses ont été raisonnables, on devrait considérer l'ensemble des frais encourus pour les services rendus. Le meilleur moyen de vérifier ce principe n'étant pas la méthode utilisée pour calculer la majoration d'un compte particulier, il convient de se demander plutôt ce qu'une société de gestion exigerait pour l'ensemble de ses services.

Le Ministère de l'impôt a exprimé les inquiétudes qu'il éprouvait à ce propos. Par

exemple, il se demande si la majoration de 15 pour cent sur les coûts du personnel administratif n'est pas doublée dans une certaine mesure par d'autres majorations de 15 pour cent sur les états de compte remboursables que les sociétés de gestion acquittent au nom des dentistes. C'est qu'il garde à l'esprit le fait qu'un tel service — l'acquittement des comptes — est rendu par le même personnel en faveur de qui a déjà eu lieu une majoration de 15 pour cent. En outre, le Ministère de l'impôt ne semble pas disposé à vouloir ajouter une majoration de 15 pour cent aux honoraires d'une société de gestion qui fournit à un dentiste des associés professionnels ou du personnel parodontaire quand ce dentiste pourrait, sur le marché libre, obtenir les services d'un tel personnel au prix qu'exige la société de gestion. Peut-être ignore-t-on que, lorsqu'une société de gestion fournit pareils services, on élimine des fonctions administratives complexes qui, autrement, devraient être assumées par le dentiste.

Si un dentiste a des problèmes d'impôt dans ce domaine, il sera important pour lui et pour la société de gestion de prouver que la somme payée pour l'ensemble des services rendus est égale ou inférieure à la somme qu'une autre société de gestion exigerait dans des circonstances analogues. On soutient que ce n'est pas la méthode employée par la société de gestion pour calculer ses honoraires qui constitue le facteur déterminant pour savoir si ceux-ci sont raisonnables, mais plutôt la somme totale exigée pour l'ensemble des services rendus.

On note avec intérêt que, dans un sondage fait par le Comité des questions fiscales auprès des sociétés de gestion professionnelle sans affiliation, on nous a parfois dit qu'un gain ne pouvait être réalisé avec une majoration de 15 pour cent calculée sur les sommes des états de compte acquittés au nom du dentiste et remboursables par lui. À ce qu'il semble, certaines de ces sociétés de gestion calculent leurs honoraires en exigeant un pourcentage des profits bruts réalisés par le professionnel, — par exemple, dix pour cent de son revenu brut. Normalement, les honoraires calculés de cette façon excèdent ceux qui sont calculés sur une majoration de 15 pour cent des comptes remboursables.

Par ailleurs, le Ministère de l'impôt a évoqué un autre facteur touchant l'impor-

tance des honoraires exigés par une société de gestion. Il s'agit des risques que celle-ci court pour les placements et les affaires effectuées en rapport avec les services qu'elle rend. Si ces risques sont peu élevés, on croit qu'il est plus difficile de justifier certaines majorations que des sociétés de gestion sans affiliation peuvent exiger. De plus, le Ministère de l'impôt précise encore qu'en comparant les honoraires de certaines sociétés sans affiliation — qui, en dollars, représentent un coût plus élevé que ce qu'exigeraient les sociétés avec affiliation, — on doit se rappeler que les services peuvent être fournis à temps partiel plutôt qu'à temps complet et, par conséquent, qu'ils peuvent justifier des honoraires plus considérables. Voilà, certes, un point litigieux.

Les autorités fiscales peuvent quel que peu s'objecter à l'idée de réviser le Bulletin d'interprétation n° IT-189 afin de tenter d'y inclure, comme nous l'avons indiqué, la totalité des honoraires pour l'ensemble des services obtenus. Elles concèdent que ce point de vue peut parfois présenter des avantages. Toutefois, les cas réels qu'on est à réviser peuvent varier souvent de façon assez considérable. C'est pourquoi les autorités pensent qu'il serait difficile d'établir dans le bulletin une règle empirique générale comme celle qu'on propose.

S'ajoute à tout cela l'importance de structurer les dispositions contractuelles établies entre la société de gestion et le dentiste, de manière à ce que la société puisse réduire son revenu imposable si le Ministère de l'impôt oblige le dentiste à réduire les dépenses déductibles encourues en fonction des services que lui rend la société de gestion. Il importe que les dispositions prises permettent à cette dernière d'obtenir une restitution des impôts payés sur les revenus qu'elle gagne et qui, subséquemment, ne seront pas admis comme dépenses déductibles pour le dentiste et seront taxés. Par exemple, si Revenu Canada considère que seulement 8 000\$ sur 10 000\$ sont déductibles pour les honoraires payés à une société de gestion, le revenu de celle-ci devrait être légalement réduit de 2 000\$ et on devrait demander une restitution d'impôt. Quand le Ministère de l'impôt rejette une partie des dépenses réclamées par le dentiste, il est important d'examiner les mesures qui doivent être prises par la société de gestion, même si aucune nouvelle cotisation ne lui

est imposée. Pour chaque cas, les mesures pertinentes à prendre dépendront des circonstances. Les membres de l'ADC devraient discuter ce sujet avec leurs conseillers fiscaux.

Pour l'ADC, il importera de continuer à surveiller la situation et de présenter d'autres soumissions et d'autres propositions aux personnes qui définissent les politiques de Revenu Canada. Ce ministère s'est montré très coopératif en donnant au Comité des questions fiscales l'occasion de présenter des soumissions sur des sujets périlleux. De plus, il apprécie toute proposition constructive émanant de l'ADC.

Il est donc essentiel que les membres continuent à aider l'ADC à rester au

courant des différentes vérifications qui ont lieu sur le sujet en cause. De cette façon, l'ADC pourra maintenir ses efforts visant à assurer que l'évaluation dans les divers bureaux régionaux du Ministère de l'impôt est équitable et consistante à travers tout le pays.

Pour conclure, nous demandons aux dentistes d'examiner sérieusement les honoraires qu'ils paient à leur société de gestion pour les services qu'ils en obtiennent, afin d'être sûrs que ces honoraires sont raisonnables, qu'ils peuvent se justifier et que de bons arguments peuvent être présentés au Ministère de l'impôt dans le cas d'une vérification ou d'une cotisation. Si des mesures peuvent être prises pour aider à rectifier les dispositions actuelles et

futures, il faut les prendre maintenant et sans nuire aux dispositions du passé. On ne s'en tirera pas toujours avec profit, mais certes, on trouvera souvent de bons arguments pour justifier l'équité des honoraires des sociétés de gestion.

Les membres de l'ADC dont le dossier fiscal est soumis à une vérification en rapport avec cette question, sont invités à en informer le Comité des questions fiscales dans la mesure où leurs conseillers fiscaux le jugent approprié. De cette façon, vous aiderez le comité à étoffer les arguments qu'il veut présenter à Revenu Canada au sujet des dispositions qui ont trait à l'équité des honoraires qu'exigent les sociétés de gestion.

VÉRIFICATIONS FISCALES ET IMPOSITIONS

David I. Matheson, Q.C.

Comme on peut le voir dans l'article ci-joint, des sociétés de gestion professionnelle, des dentistes et d'autres groupes professionnels seront soumis à des vérifications fiscales. Ce problème est dû au fait que les sociétés de gestion professionnelle ont joui d'un crédit considérable récemment. Aussi y a-t-il eu des modifications législatives qui les touchent. De plus, les professionnels, les administrateurs, les artistes et les athlètes ont eu de plus en plus recours, au cours des dernières années, à ces sociétés, obligeant le Ministère de l'impôt à revoir sa politique à leur égard. Plus particulièrement, le Ministère de l'impôt a procédé à la vérification des sociétés de gestion pour déterminer si les procédés des contribuables sont acceptables. Par exemple, il cherche à savoir si la société n'est pas un canular, si ses honoraires sont raisonnables et ainsi de suite.

Quoi qu'il en soit, il importe que les dentistes, tout comme les autres contribuables, comprennent clairement ce qu'ils doivent faire dans le cas d'une enquête, d'une vérification ou d'une imposition par le Ministère de l'impôt. En outre, il est essentiel qu'ils agissent avec prudence et cherchent à obtenir des conseils opportuns pour savoir comment procéder en pareille éventualité.

Dans ces circonstances, un dentiste doit voir un expert fiscal aussitôt que le Ministère de l'impôt fait une enquête sur un point de sa déclaration d'impôt ou de celle

de la société qui gère son cabinet. Parce que notre système fiscal est complexe, il vaut mieux, en général, que le contribuable confie les problèmes aux professionnels qui ont préparé sa déclaration d'impôt ou à d'autres conseillers fiscaux compétents. Dans ce domaine, rien ne remplace l'expérience. Les nombreuses questions qui pourront être posées auront sans doute trait à des considérations fiscales et légales très techniques et, parfois, à quelques conséquences plutôt sombres. Il se peut cependant que le contribuable, sur le coup d'une première émotion, ne voit rien de tout cela.

Par exemple, les répartiteurs demandent souvent, par simple routine, quels sont les liens légaux qui unissent les parties ayant rapport avec la société de gestion. Ainsi la relation peut être celle d'un employeur à un employé, ou bien elle peut mettre en cause un entrepreneur ou un conseiller indépendant qui rend des services et des personnes qui les reçoivent. Dans chaque cas, les dispositions fiscales peuvent différer considérablement. De fait, il y a des centaines de cas documentés sur de telles relations. Souvent, on demande: «Quel est le prix raisonnable qu'une société de gestion peut exiger des personnes qui ont recours à ses services?» Cette question comprend plusieurs points:

- (a) Qu'est-ce qui est permis en vertu de la Loi de l'impôt sur le revenu?
- (b) Que se produit-il pour un praticien

privé qui ne se trouve pas dans une position de dépendance?

- (c) Quelles sont les dispositions fiscales habituelles?
- (d) Ces dispositions sont-elles légales?
- (e) Quelle est la politique courante du Ministère de l'impôt à ce sujet?
- (f) Y a-t-il des changements en perspective?

Ces points sont couverts dans le rapport séparé ci-joint. On en retiendra ceci, à savoir qu'ils montrent clairement qu'il y a souvent des conséquences importantes attachées à chaque question ordinaire que le Ministère de l'impôt pose au contribuable.

Incidentement, rappelons que le contribuable ne doit éprouver ni embarras ni sentiment d'infériorité s'il propose au répartiteur qu'il désire s'en remettre à ses conseillers fiscaux qui, mieux que lui, sont au courant des questions fiscales de ses affaires. C'est là une habitude tout à fait normale que les répartiteurs connaissent et apprécient.

Pour les profanes, disons qu'une vérification fiscale commence avec un rapport informatique, une lettre ou un appel téléphonique de la part du Ministère de l'impôt qui désire faire enquête sur un ou plusieurs points de votre déclaration d'impôt. Il peut s'ensuivre qu'on veuille examiner vos dossiers ou ceux de la société de gestion. De fait, le Ministère de l'impôt voudra avoir une occasion de discuter certains points avec vous, le contribuable. C'est à

ce moment que vous devez consulter votre conseiller fiscal, et non le Ministère de l'impôt. Le conseiller fiscal doit alors demander au Ministère de l'impôt de bien préciser les points en litige. D'ordinaire, le Ministère de l'impôt accorde au contribuable un délai raisonnable pour répondre. Si ce délai ne suffit pas, il accepte habituellement de le prolonger. N'hésitez donc pas à demander du temps supplémentaire. Si l'affaire en cause n'est pas réglée dans un délai raisonnable, le Ministère de l'impôt émettra un avis d'imposition.

Une fois émis un tel avis, le sort en est jeté et des procédures plus formelles sont entreprises. Le contribuable doit alors déposer un avis d'opposition, indiquant les faits et raisons pour lesquels il ne devrait pas y avoir d'imposition ou pour lesquels l'imposition devrait être moins élevée. Malheureusement, trop souvent le contribuable ne fait appel aux conseillers fiscaux que lorsque l'avis d'imposition a été émis. Néanmoins, il est crucial dans ce cas qu'il ait recours à eux pour préparer l'avis

d'opposition et obtenir leurs conseils au sujet des procédures subséquentes.

De plus, le contribuable doit respecter le délai imposé pour adresser l'avis d'opposition — il a 90 jours à compter du jour où a été posté l'avis d'imposition, — et ne doit pas attendre trop longtemps avant de prévenir son conseiller fiscal. Ordinairement, celui-ci a besoin de beaucoup de temps pour se renseigner sur les faits, étudier la loi et préparer l'appel. Si le contribuable dépasse le délai fixé, il ne peut obtenir de sursis à moins de convaincre la Commission de révision de l'impôt — qui agit comme tribunal de l'impôt pour le gouvernement fédéral — qu'il serait juste et équitable qu'on lui en accorde un. En général, il est très difficile d'obtenir cette faveur. L'avis d'opposition doit contenir un dossier soigneusement préparé sur les affaires du contribuable, non seulement à des fins de révision par le Ministère de l'impôt, mais aussi dans le but de poser de solides fondations pour tout appel possible auprès de la Commission de révision de

l'impôt, d'une cour fédérale ou, en dernier ressort, de la Cour suprême du Canada, attendu qu'un appel soit justifié par les circonstances.

Par ailleurs, il faut avoir soin de s'assurer que, si un contribuable, dans sa déclaration d'impôt, se voit refuser des dépenses effectuées au profit d'une société de gestion et qu'il en appelle, la société en cause devrait également prendre des mesures pour tenter de conserver ses droits d'appel sur la question en litige, au cas où elle aurait droit à une restitution d'impôt si l'appel du contribuable était rejeté. Il existe une procédure permettant à la société de gestion d'adresser une renonciation au Ministère de l'impôt. Cette procédure doit être suivie seulement pour la question en litige. La renonciation ne doit pas être générale, sinon le Ministère sera en droit de faire enquête sur d'autres questions de l'année fiscale visée.

Conservant tous ces renseignements à l'esprit, agissez avec prudence et demandez les avis d'un expert-conseil.

Canadian Dental Association **Journal** de l'Association Dentaire Canadienne

Consultez le Journal de l'ADC. Dans le numéro de novembre, vous pourrez lire :

- une étude sur le nombre de dentistes qu'il y a en Saskatchewan par rapport à la population.
- un article sur la grave pénurie de fluor qui touche le Canada.

Et dans le numéro de décembre, vous trouverez :

- un examen de la situation touchant le vaccin contre l'hépatite virale B au Canada.
- le rapport du directeur général de l'ADC sur la dernière assemblée annuelle du Conseil d'administration.



APPENDIX G
Taxation Committee
Board of Governors
Mar. 4-5/83

CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

Dear Colleague:

You will recall the October 1982 Communiqué contained two articles dealing with management companies. The purpose of that Communiqué was to inform members of the profession of some of the tax principles involved in using management companies, Revenue Canada's (Taxation) policy on the subject, the application in some instances of the policy and some of the things members might consider doing in the event that they are subject to a tax audit. Also included as part of that Communiqué was a questionnaire designed to assist us in gathering general information on professional management companies.

There was a significant response to this questionnaire. On behalf of the Taxation Committee I wish to thank all members who returned these questionnaires. Your answers provided valuable information which assisted our efforts to convince Revenue Canada that overall profits generated by management companies in dental practices are 'reasonable'.

To keep you fully informed, what follows is a report of the CDA's Taxation Committee's January 20, 1983 meeting with officials of Revenue Canada regarding current audit proceedings on many professional management companies operating in conjunction with dental practices. Also included is some vital information on Bill C-139. This federal tax bill contains a management company provision which will be devastating to many such companies.

The Taxation Committee is preparing a brief for presentation to the Minister of Finance expressing our opposition to the management company provision contained in Bill C-139.

Sincerely,

Robert N. Hicks, D.D.S., M.Sc.
Chairman, Taxation Committee

REVENUE CANADA AUDITS ON DENTAL
PROFESSIONAL MANAGEMENT COMPANIES

As we submitted to you in the latest CDA communiqué, Revenue Canada is disallowing dentists, in a number of cases, the deduction of a service charge based on a percentage of the amounts of dentists' payables and in some instances receivables managed by professional management companies. Their position is that the amount of dentists' payables or receivables is not relevant to the determination of a reasonable service charge. They say that the service charge, usually cost plus a 15% mark-up, should only be applied to direct costs (e.g. staff and related costs) of the company and not also to the dentists' payables and receivables managed by the company. They suggest that by allowing both, a duplication of fees results.

CDA's Taxation Committee disagrees with some of the rationale being utilized by Revenue Canada in these audits and therefore expressed to the officials of Revenue Canada the following views:

1. Interpretation Bulletin IT 189 issued by Revenue Canada provides that a management company should charge an appropriate total amount for services provided which would include a reasonable profit to such companies; and that the charge should be reasonable in relation to what would be charged in a free market for the same services. This supports our position that assessors should look to the actual total amount of the fee for services rendered not the formula used for calculating the fee nor look to a specific charge in isolation in order to determine if the fee is reasonable.
2. The CDA is of the view that in most instances it is unreasonable for Revenue Canada to allow a mark-up (usually 15%) on only the direct costs of the management company. Such a restriction results in most instances in a less than free market charge. In most instances, a mark-up in the range of 15% on both direct costs and on amounts of dentists' payables managed by the management company along with a further charge on the collection of receivables in total produce a reasonable fee and charge when related to comparable arm's length transactions.

..continued...

Our survey suggests this. We are gathering more particulars on arm's length professional management services to provide backup for this position.

3. Our initial survey indicates that in some instances reviewed, the arm's length service fees were greater than a number of non-arm's length service fees which were being assessed and which involved comparable facts.

The discussions between the CDA Taxation Committee and Revenue Canada officials continue to be of a constructive nature. The Department is very interested in receiving in a timely manner further particulars of arm's length arrangements so as to consider the merit of our views. We are providing such information.

Understandably, many cases depend on their particular facts. There is concern on Revenue Canada's part that in some cases some of the management services are not really being rendered by the management company, but are still being rendered by the dentist paying for the services. CDA's Taxation Committee identified to Revenue Canada that they were not presenting arguments on behalf of management companies that were not truly performing the services they identified in their contractual agreements with the dentist, nor were they attempting to support management service charges on all expenses that exceed the 15% mark-up.

We believe that Revenue Canada may recognize that in a number of cases the total fees charged to the dentist by the professional management companies are reasonable when you look to the actual bottom line charges and ignore the formulas upon which different segments of the charges are calculated. However, it is difficult for Revenue Canada to generalize in this regard.

Advice To Dentists and Professional Management
Companies Being Audited or Under Review on
the Reasonableness of Fees Issued

We suggest that if you are currently being audited or assessed on this subject, then you should immediately update your tax advisor on what the CDA's approach with Revenue Canada has been. It may also be prudent for your advisor to make sure the tax assessor on your case is fully aware of what is going on through the CDA.

The CDA Taxation Committee will keep you informed on its representations to Revenue Canada and any responses thereto.

PROFESSIONAL MANAGEMENT COMPANIES AND

BILL C - 139

Federal Tax Bill C-139 introduced last December contains a management company provision which will be devastating to many management companies and which heretofore was understood not to be intended for or applicable to professional management companies. However, the broad wording of such provisions may apply to some professional management companies and we are advised that the Federal Department of Finance and Revenue Canada will be enforcing such provisions against those professional management companies to which in their view such provisions apply. Equally disconcerting is that these tax amendments will apply to taxation years commencing after November 12, 1981, when the subject was first introduced by way of Budget.

In essence, the amendments provide that a corporation that carries on a "personal services business" as now defined in the amendments will have to pay the full corporate tax rates of approximately 50% and will be extremely restricted on allowable expenses.

Briefly, a "personal services business" company is defined as follows:

- a) it provides services through an individual (such as a dentist's wife) who performs services for the company and who is also a "specified shareholder" of the company or is "related" to a specific shareholder (as a rule of thumb a specified shareholder is one who directly or indirectly holds 10% or more of any class of issued shares);
- b) it has been interposed in what would normally constitute an employee/employer relationship (e.g. between a wife and her husband who is the dentist retaining the services); and
- c) the individual rendering services would reasonably be regarded as an "employee" of the dentist "but for" the existence of the company.

The only expenses deductible by such company would be for the salary and cost of other benefits or allowances provided to such individual, certain expenses associated with selling property or negotiating contracts that are ordinarily deductible from employment income and amounts paid for legal expenses incurred by the company in collecting amounts owing for services rendered.

If there are more than five full-time employees who are not specified shareholders of the company and are not "related" to any specified shareholders, then the company is not caught by the personal services business net.

.../2

It is usually a very contentious legal issue as to whether or not an employee/employer relationship or an independent contractor relationship exists or would have existed.

This entire situation is completely untenable to the CDA, considering the original expressed intention of the proposed legislation to only pursue incorporated executives, the legislative history behind the acceptability of professional management companies for lower corporate rates, the increased corporate rate on professional management companies from approximately 25% to approximately 33 1/3%. The CDA is immediately making its views known to the Minister of Finance.

CANADIAN DENTAL ASSOCIATION
BUILDING CONTINGENCY RESERVE FUND
TERMS OF REFERENCE

In accordance with a resolution passed by Executive Council in November, 1982, a Building Contingency Reserve will be established upon approval of the following terms of reference.

In the years of a recorded excess of revenue over expenses at the end of each CDA fiscal period, a transfer, authorized by the Executive Council, shall be made from the surplus to a separate cash account and such amounts shall be allowed to accumulate to a maximum of \$100,000.

The authorized amount in 1982 is \$20,000. The intent is that interest earned by the fund shall be credited to the fund account until the maximum is reached and thereafter shall accrue to the general fund account as an offset to the building maintenance expense.

Payments shall be made from the fund for major expenses relating to the building. Major expenses are not recurring cyclical expenses, but are designated as one-time expense items, in excess of \$1,000, of which the benefit would extend over more than one accounting period.

Proposed payments from the fund for expenses must be authorized by the Executive Council.

Approved - Executive Council (Jan. 28/83)

TRANSLATION

February 8, 1983

Dr. W.R. Thompson,
President
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Dr. Thompson:

I would like to confirm, as already discussed with you, that the Quebec Dental Surgeons Association would be honoured to collaborate with the CDA in jointly hosting the FDI Congress in 1988.

I would point out that this is the third time that we have made this request of the CDA in the past few years. As you can appreciate, the QDSA would like to have a response from you as soon as possible.

The city of Montreal is now an advanced Convention centre. Moreover, with its 12,000 available rooms, no participant to the Congress would have to stay outside the city limits. This has not always been the case with other locations where the FDI Congress has taken place.

We are now ready to collaborate with you in taking the necessary action to request that Montreal be chosen as the site for the 1988 Congress of the FDI to take place preferably in the third week of September.

Anticipating a favourable response to this official request, would you please accept our kindest regards.

Sincerely yours,

Claude Chicoine, d.d.s.
President

c.c. Management Committee
Pat Cunningham



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

OFFICE OF THE PRESIDENT

February 15, 1983

Dr. C. Chicoine
President & Executive Director
Assoc. des chirurgiens dentistes
du Quebec
4159 est rue Belanger
Montreal, Quebec
H1T 1A2

Dear Dr. Chicoine:

Thank you for your letter of February 8, 1983 offering to collaborate with the CDA in jointly hosting an FDI Congress in 1988.

I realize that you have in the past verbally requested that CDA host such a congress and I responded that until the American Dental Association determined their future in the FDI a congress should not be considered by Canada. In addition, the rules governing congresses, and especially the financial responsibilities of the host country, have become more stringent so it was necessary to obtain the new guidelines.

The American Dental Association has now rejoined the FDI so that problem is resolved. In addition, we have distributed the new guidelines in running congresses to you and the CDA Executive. Such hosting was discussed at the recent Executive Council meeting but the only decision was to await your letter and bring the matter to the Board of Governors meeting.

The matter of hosting an FDI congress in 1988 will, therefore, be brought before the Board of Governors at the March, 1983 meeting for a decision. I am enclosing the latest FDI "Message from the President" letter which on page 7 indicates that the FDI already has two invitations for hosting the 1988 congress and one for 1989. Therefore, if we decide to proceed for 1988 the competition will be considerable.

Thank you for your letter.

Sincerely yours,

William R. Thompson, D.D.S.
President

WRT/ssd

The Executive Committee decided to ask the Philippine Dental Association for full documentation with regard to the Congress to be put together with the report of Mr Moulton and examined at the meeting of the Executive Committee in April.

1987 There are two invitations for the year - one from Argentina and one from Israel. A lot of further investigations have to be made before a proposal for a decision can be made.

For the year 1988 invitations have been received from Australia and Singapore, and for the year 1989 we have an invitation from the Netherlands.

Further discussions will be held at the "regular" Executive Meeting in April.

From Latin America two invitations for visits have been offered. One was for the President Elect to visit Buenos Aires in September 1983. As the President Elect already has a very hard travel schedule for 1983 it was decided that he should look at the situation and then give his answer.

The Central American Organization, FOCAP, had forwarded an invitation through Dr Ariel Gomez to the Executive Director to visit Guatemala 6 - 11 March, 1983. The Executive Committee found that priorities had to be made with regard to the travel programme of the Executive Director, and consideration given to costs, time away from Headquarters Office, necessity of participation, etc. First of all some visits have to be paid to Congress Organizers but a high priority should also be given to the People's Republic of China - especially if the interest in FDI membership from that country leads to a request for further, direct communication.

The Executive Committee then looked at the FDI income budget for 1982 and the preliminary outcome. As far as could be predicted by the time of the Executive Committee meeting, the year 1982 will show an appreciable excess of income over expenditure, instead of the budgeted excess of expenditure over income of about \$ 45 000. There are several reasons for this result. The main factors are first of all the currency situation between the and the US \$, and then a very hard, emergency budget with almost no money available for expenditures for the Members of the Executive Committee, etc.

The budget for 1983 was revised in the light of the reapplication for membership of the ADA and the payment for that year of \$ 42 000.

The Executive noted that there was a request from the General Assembly in Vienna that the Executive should look at the budget for 1983 with regard to the possibility of giving the Vice-Chairmen of the Commissions travel and subsistence to the Congress in Tokyo.

The Executive Committee therefore decided to use the improved income for 1983 in the first hand to re-establish the financial background for the Federation and to give travel and subsistence to the Vice-Chairmen of the Commissions. At the Executive Meeting in April the situation for the President, the President-Elect and the Treasurer should be looked at and if possible brought back to the situation those officers had before the financial situation in the year 1982.

The Executive Committee discussed applications for membership from the dental section of the United Arab Emirates Medical Association, and from the Palestinian Dental Association. The Executive Director will ask for some further information in time for the next meeting of the Executive Committee.

TRANSLATION

le 15 février 1983

Dr C. Chicoiné
Président et directeur administratif
Association des chirurgiens dentistes
du Québec
4159 est, rue Bélanger
Montréal (Québec)
H1T 1A2

Cher Dr Chicoiné,

Merci pour votre lettre du 8 février dernier dans laquelle vous offrez de vous joindre à l'ADC pour accueillir le Congrès de la FDI en 1988.

Je sais que, dans le passé, vous avez demandé oralement que l'ADC soit l'hôte d'un tel congrès, sur quoi j'ai répondu que, tant que l'Association dentaire américaine n'aurait pas clarifié la nature de ses rapports avec la FDI, le Canada devait s'abstenir de prendre une telle initiative. En outre, le règlement touchant les congrès et, surtout, les responsabilités financières qui incombent au pays où ils sont tenus, sont devenus plus astreignants, d'où la nécessité d'obtenir les nouvelles directives.

L'Association dentaire américaine s'étant à nouveau affiliée à la FDI, ce problème est maintenant résolu. Par ailleurs, nous vous avons distribué, à vous et à tous les membres du Conseil exécutif de l'ADC, les nouvelles directives touchant la tenue des congrès. Lors de la dernière assemblée du Conseil exécutif, nous avons discuté la possibilité d'inviter la FDI à tenir un congrès au Canada. Toutefois, la seule décision prise a été d'attendre une lettre de votre part et de porter le sujet à l'ordre du jour de l'assemblée du Conseil d'administration.

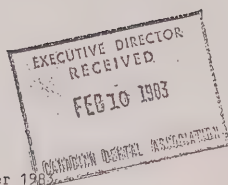
Ainsi donc, le sujet sera soumis à une décision du Conseil d'administration lors de son assemblée de mars prochain. Je joins le dernier "Message du président" de la FDI qui, en page 7, indique que la FDI a déjà reçu deux invitations pour le congrès de 1988 et une pour celui de 1989. Si nous décidons vraiment d'inviter la FDI à tenir son congrès au Canada en 1988, il faudra s'attendre à forte concurrence.

Je vous remercie à nouveau pour votre lettre et vous prie d'agréer l'expression de mes sentiments les meilleurs.

Le président

(William R. Thompson, dds)

*Association
des chirurgiens dentistes
du Québec*



Montréal, le 8 février 1983

Docteur W.R. Thompson
Président
Association dentaire canadienne
1815, Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Monsieur le président,

Par la présente, nous désirons confirmer la teneur de notre dernière conversation à l'effet que l'Association des chirurgiens dentistes du Québec serait honorée de collaborer avec l'Association dentaire canadienne pour recevoir à Montréal, en 1988, la Fédération Dentaire Internationale.

Nous attirons votre attention sur le fait que c'est la troisième fois, en autant d'années consécutives, que nous formulons cette demande.

Vous comprendrez, à quel point il est important, au point de vue organisation, d'obtenir une réponse dans les meilleurs délais.

Montréal possède maintenant un centre des congrès avant-gardiste. De plus, avec ses 12,000 chambres, aucun congrès n'aura à demeurer à l'extérieur des limites de l'île de Montréal, ce qui ne fut pas toujours le cas dans certains endroits où le congrès de la F.D.I. s'est tenu.

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Docteur W.R. Thompson, .../2

Nous sommes disposés à entreprendre dès maintenant, en collaboration avec vous, toutes les démarches nécessaires pour obtenir le choix de Montréal pour le congrès de la F.D.I. en 1988, lequel nous souhaiterions voir se tenir durant la troisième semaine de septembre.

Anticipant de votre part un accueil favorable à cette demande officielle, nous vous prions d'agréer l'expression de nos sentiments les meilleurs.

Le président,

A handwritten signature in dark ink, appearing to read 'Claude Chicoine', written in a cursive style.

Claude Chicoine, d.d.s.

CC/sd

FDI - CONGRESSES

SYNOPSIS - FINANCIAL RESPONSIBILITIES OF THE ORGANIZING COMMITTEE (CDA)

Invitations

In accordance with Article III of the Constitution of the Federation Dentaire Internationale, the Federation shall "sponsor an Annual World Dental Congress". This means that the Federation decides on the site of future congresses on the basis of invitations from its Regular Member Associations:

Invitations for an annual world dental congress shall be presented in writing to the Executive Director not less than four (4) years in advance of such congress. A preliminary invitation may be issued up to seven (7) years in advance and shall be confirmed five (5) years in advance. An invitation for a Congress must be supported by all Member Associations of the inviting country and must be submitted at least 150 days in advance of the session of the General Assembly at which it will be considered. (Regulations, Chapter VIII, Section 10)

In the invitation must be specified: (1) the city; (2) congress facilities; (3) the proposed dates; (4) that existing governmental regulations would not impede the normal running of the congress (e.g. restrictions on transfer of funds abroad, entry of certain nationals etc.); (5) the conditions under which a Military Conference can be held; (6) whether it is customary at congresses in the host country to charge participants an enrolment fee.

On receipt of the invitation the Executive Director shall agree with the inviting association(s) on arrangements for a visit to the intended congress site in order to see the facilities that would be available to the FDI for the congress and have discussions with the host association(s) airlines, local congress organizers and hoteliers as appropriate. The costs for travel and hotel accommodation for this visit shall be borne by the host country.

Time and Place

The place of the annual world dental congress shall be determined by the majority vote of the General Assembly not less than four (4) years in advance of the congress. The time of the annual world dental congress shall be determined by the Council in consultation with the Member Association or National Committee of the inviting country, subject to ratification by the General Assembly.

.../2

General Principles of Financing

The Federation shall be responsible for financing the congress only to the extent specifically authorized by the Council. The following guidelines shall be considered by the Council in establishing the financial arrangements associated with annual world dental congresses.

For those congresses hosted by national associations at which an enrolment fee for registration is applicable, fifteen per cent of each enrolment fee shall be set aside as a direct payment to the Federation. In addition the net surplus of the annual world dental congress shall be divided equally between the Organizing Committee and the FDI.

For those congresses hosted by a national association at which an enrolment fee will not be applicable, a negotiated sum per participant to be paid to the FDI, shall be agreed between the inviting organization and the FDI prior to the acceptance of the invitation.

A negotiated percentage, up to a ceiling of 10 per cent of the gross rentals collected from the Dental Trade Exhibition, shall be paid direct to the Federation. The percentage shall be agreed between the inviting organization and the FDI prior to the acceptance of the invitation.

Thus, the host association(s), through an organizing committee, assume(s) the financial responsibility for the income and expenditures of the Congress with minor, specific exceptions as set out in the Memorandum.

Finances

The Organizing Committee may request a refundable loan from the host organization and/or the FDI to help meet early expenditure in preparing the session before income is received from enrolments, this to be repaid in addition to the 15 per cent of enrolments and before any net surplus is considered (see General Principles of Financing - Section 5).

It is strongly recommended that additional income be obtained from sources other than enrolment fees, such as the government, industry and commerce. Further income should be obtained from the Dental Trade Show and advertisements in the programme.

As the Regulations state that fifteen per cent of each enrolment fee to all meetings sponsored by the Federation shall be set aside as a direct benefit to the FDI, the Federation shall have the right to draw on this fifteen per cent during the annual world dental congress to meet expenses incurred (see Section 5).

.../3

Finances (continued)

The following are the only items of expenditure which are paid for by the Federation:

- (a) Travel costs listed under 9.15 b) and c) to the extent that they are not covered by the congress industry.
- (b) Hotel costs listed under 9.15 b) and c) to the extent that they are not covered by the congress industry.
- (c) Beverages and refreshments for meetings of the Council, Commissions and the Secretariat of the FDI, provided all bills for the orders carry the signature of a person authorized by the Executive Director.
- (d) Complimentary tickets for social events for members of the List of Honour, the Executive Committee, Assistants to the Executive Director and occasionally special guests invited by the Council of the Federation.

Organizing Committee

The Congress shall be organized and administered by an Organizing Committee appointed by the Member Association(s) or National Committee of the country in which the Congress will be held. The Organizing Committee shall elect its own officers and shall have the duty of making arrangements for the Congress in accordance with these Regulations and a Memorandum on Annual World Dental Congresses approved by the Council of the Federation. The Executive Committee of the Federation shall have the right to attend meetings of the Organizing Committee.

The Organizing Committee shall have the power to set up special committees to carry out specific duties. (Regulations, Chapter VIII, Section 10F)

It will be necessary to use professional congress organisers to work with the Organizing Committee in planning and administering the congress. The conditions for such assistance should be agreed in broad terms between the inviting organisations and the FDI prior to the invitation being accepted.

The most important areas in which such expertise is needed are the enrolment of participants and reservation of hotel accommodation prior to the congress and registration of participants on their arrival at the congress site. Smooth and efficient procedures will create a favourable impression of the congress whilst inefficient enrolment procedures will reduce the participation. This is particularly noticeable with regard to participants living at a considerable distance from the host country.

Organizing Committee (continued)

In order to maintain a standardised, uniform registration procedure year by year for international participants which will ensure rapid and efficient confirmation of enrolments, the Federation has established a separate, computerized, non-profit enrolment facility, operated from the United Kingdom by consultants under the Federation's direct control.

For enrolment of participants from the host country, and indigenous congress organiser should normally be used. A copy of the draft contract with the local congress organiser should be submitted to the FDI for approval before it is signed by the organizing committee.

The division of responsibilities and methods of cooperation between the organizing committee, the FDI and the local professional congress organiser will vary between different congress countries and must therefore be analysed and agreed between the inviting organization and the FDI prior to acceptance of the invitation and before the start of negotiations with local professional congress organisers.

The contract with the professional congress organiser should be drawn up by a lawyer, approved by the Organizing Committee and signed by the Chairman of the Committee and the organiser. The contract should specify clearly the duties and responsibilities of the organiser, the period for which he or she is engaged and the terms of remuneration. A congress organiser should not be offered any share in the profit of a congress as the Federations's congresses are not intended to be profit-making concerns. It is essential that the responsibility for financial control of the congress and the authorization of all expenditure rests with the Treasurer and such other officer as may be designated by the Organizing Committee. This responsibility should not be delegated to the professional organiser.

The Organizing Committee shall consist of approximately eight members.

The Host Association(s) shall designate a chairman, a secretary and a treasurer of the Organizing Committee.

It is advisable, if possible, that among the officers and members of the Committee there is :

- (a) One (or more) with an intimate knowledge of the organization of the FDI.
- (b) One (or more) with a scientific background for dealing with the scientific programme (see Chapter VIII, Section 10 F and G and Section 20 of the Regulations). Also see Appendices I and II.
- (c) One with a good knowledge of meeting organization and the technical requirements of a Congress.

Organizing Committee (continued)

- (d) A military dental officer who will be responsible for cooperating with the chairman and vice-chairman of the Commission on Defence Forces Dental Services in the organization of the International Military Conference.
- (e) One with business knowledge who need not necessarily be a dentist.
- (f) A public relations officer.

The following subcommittees are also advisable:

- Scientific Subcommittee
- Social (Entertainments) Subcommittee
- Exhibition Subcommittee
- Ladies Committee
- Technical Subcommittee
- Military Subcommittee

General Remarks An Annual World Dental Congress comprises:

- A. The Opening Ceremony
- B. The FDI business sessions - General Assemblies (2); Council (3); Commission meetings (4); Council Committees (5); Meetings of Regional Organizations (3); Working Group meetings and any other meetings that may be called by either the General Assembly or the Council.
- C. Scientific Programme - Meetings, lectures, clinics, demonstrations, films, exhibits.
- D. Exhibitions - industrial, scientific, oral hygiene, art historical, etc.

It is desirable for the above to be accommodated in one congress area. Since this is not always practicable, the room requirements are described below under different categories with comments regarding their alternative uses.

Broad Phases of Organization

Not less than three years in advance and as soon as possible after the General Assembly has officially accepted the invitation.

- A - Setting up of Organizing Committee and subcommittees

Broad Phases of Organization (continued)

- B - Decision on dates of Congress) to be approved by the General Assembly
- C - Decision on place of Congress) preferably at time of invitation
- D - Decision regarding the need to use
a professional congress organizer (see 6.1 Organizing Committee)
- E - Opening of Congress bank account
- F - Decision on patronage
- G - Draft Rules of Congress and of the Industrial Exhibition (based on
this memorandum)
- H - Decision on enrolment fees (To be approved by Council)
- I - Preparation of preliminary budget (to be revised as congress
organization progresses)

N.B. If professional congress organizers are employed, then a contract must be drawn up, by a lawyer and signed and all phases of organization must be planned in close cooperation between the Organizing Committee, the professional congress organizers and the FDI Executive Director. (see 6.3)

- J - In close cooperation with the Scientific Programme Committee of the FDI: Decision on themes of scientific programme. See Manual on the Scientific Programme (Appendix I).

Not less than two years in advance:

- A - Sign rental contract for the meeting hall and arrange insurance
- B - Make arrangements with the hotels for accommodation
- C - Make arrangements for interpretation
- D - Make reservations for social events (price to be fixed later)
- E - Send information with photographs to editors of national dental journals
- F - Send out invitation to speakers on main themes.
- G - Approach outside agencies - government, industry - for financial support (see 9.6)
(This is preferably done in consultation with the Executive Director of the FDI)

Interpretation

Simultaneous interpretation is essential in English, French, German Spanish and Japanese.

Modern simultaneous interpretation equipment should be utilized with individual microphone control. Two trained engineers should be in attendance during all meetings. Approximately 25 microphones and 500 headsets are required for the scientific and business sessions, but a larger number of headsets will for instance be needed for the Opening Ceremony, unless the hall is provided with permanently installed headsets. The cost of this is separate from interpretation and high.

Interpretation (continued)

Interpreters One team of eight and one team of ten interpreters are required as a minimum to provide simultaneous or consecutive interpretation. A third team of varying composition will frequently be needed for three or four days to accommodate local wishes for particular scientific programme sessions or increased interpretation for the benefit of the participants from the host country. The cost of these interpreters is very considerable and increasing. The Organizing Committee is strongly advised, in cooperation with the FDI Headquarters, to obtain preliminary estimates of such costs not less than three years in advance as a basis for the first preliminary budget.

FDI Annual World Dental Congress combined with National Meeting

Combined meetings should not take place unless it appears essential for national administrative or financial reasons. It should be stated in the original invitation whether an annual world dental congress, combined with a national meeting is contemplated. If it is proposed to hold a combined meeting, the host association should make it clear when issuing the invitation to the Federation, whether or not it wishes to admit all its members to the Congress (see 10.2)

At a combined meeting it must be made quite clear that the FDI Annual World Dental Congress is just as important as the national meeting. All the relevant sections in the Memorandum should therefore be complied with. The FDI Committee on Scientific Programme will plan the scientific programme of the combined meeting in conjunction with a person or persons designated by the organizing committee of the national dental association. All social events should, if possible, be combined.

Hotel Accommodation

Hotel accommodation presents a problem in almost every city of the world, and whilst it is customary to designate a headquarters hotel, many other hotels will also have to be used at an annual world dental congress. The Organizing Committee is advised to make contact with a travel agency or tourist board if such exist.

Any hotel selected for the FDI headquarters should have some suites and undertake to place at the disposal of the Organizing Committee a minimum of 200 good-sized double and single rooms with bath.

Publicity and Programme - Public Relations

It is advisable to appoint a Press and Public Relations Officer and Committee to take care of publicity, the programme and public relations.

A public relations firm should be engaged to conduct a public relations programme for the congress. Provision should be made for this in the budget.

Publicity and Programme - Public Relations (continued)

Not less than two years before the Annual World Dental Congress various types of publicity material should be prepared for use in the FDI Newsletter and national dental journals. When possible, this should include a preliminary programme containing information on the broad outline of the congress. Photographs should be provided.

The preliminary programme must be available, together with posters and tourist brochures at the previous annual world dental congress. A representative of the Organizing Committee should, if possible, be available to answer questions about the forthcoming meeting and will be offered the facilities of a stand to display promotion material (see 13.2 (c))

A preliminary programme should be produced in English, French, German and Spanish.

A full report on the session will be expected from the Organizing Committee not later than six months after the closing of the congress. This report should include an audited Income and Expenditure Account showing all details of the finances involved in running the congress to cover the following headings:

(N.B. A balance sheet from a previous congress is available on application to the Executive Director of the FDI).



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

December 14, 1982

Dr. John Coady,
Executive Director
American Dental Association
211 East Chicago Ave.
Chicago, Illinois
60611 U.S.A.

Dear John:

The Canadian Dental Association has been requested by the Royal College of Dentists of Canada to present its views to the ADA Council on Dental Practice on the "Revision of Criteria for Recognition of Specialty Areas of Dental Practice & Related Policies".

We are therefore enclosing a copy of a brief prepared by the RCDC which may be of interest to Dr. D. Wagner, who I understand is Chairman of this Council. The comments contained in this brief are supported in principle by the Canadian Dental Association and it is hoped that this information will assist in a better understanding of dentistry and the specialities in Canada.

Yours sincerely,

A handwritten signature in dark ink, appearing to read 'Hubert Drouin', with a stylized flourish at the end.

Hubert Drouin,
Executive Director

c.c. Dr. William R. Thompson, President
Dr. J.H.P. Main, RCDC

HD/ssd
Encl.

Comments on the American Dental Association's
Proposed Requirements for Recognition of Specialty Areas
and National Certifying Boards in Dentistry

Introduction

The Royal College of Dentists of Canada was established in 1965 by Act of Parliament at the request of the Canadian Dental Association with the following objects:

- (a) to promote high standards of specialization in the dental profession;
- (b) to set up qualifications for and provide for the recognition and designation of properly trained dental specialists;
- (c) to encourage the establishment of training programs in the dental specialties in Canadian schools; and
- (d) to provide for the recognition and designation of dentists who possess special qualifications in areas not recognized as specialties.

In accordance with its incorporating Act, the College conducts examinations in all dental specialties recognized by the Canadian Dental Association, namely,

Dental Public Health
Dental Radiology*
Endodontics
Oral Pathology
Oral and Maxillofacial Surgery
Orthodontics
Paedodontics
Periodontics
Prosthodontics

The eligibility requirements for candidates wishing to take the examinations are identical to those required by the Specialty Boards in the United States.

There are two examinations. The first is for Membership in the College and may be taken on completion of formal training in the specialty in a CDA/ADA accredited training program. The standard required to pass this examination is clinical competence in the specialty.

The second examination is for Fellowship in the College which may be taken after passing the Membership Examination and after having devoted at least five years to the specialty, comprised of the formal study period followed by a period in the practice of the specialty.

*It will be noted that Dental Radiology is recognized as a specialty by the Canadian Dental Association. This recognition has existed since 1973.

.../2

The College is composed of 360 Fellows and 156 Members, in September, 1982. Many of our Fellows also have the American Boards in the appropriate specialty. For comparison, the Royal College of Dentists of Canada could be considered as a body analogous to a united Specialty Board in the United States, if all the individual Specialty Boards were amalgamated into one organization. In seven of the provinces of Canada, Membership of the College is the prerequisite to recognition and registration as a specialist by the Provincial Dental Licensing Body.

Canadian standards of practice in dentistry have always been essentially the same as those pertaining in the United States. There is reciprocal recognition of accreditation standards of undergraduate and postgraduate dental educational programs between the Canadian and American Dental Associations.

In the opinion of the Council of the Royal College, such similarity in standards and reciprocal recognition of educational programs is highly desirable. Hence any significant changes in dental specialty recognition in the United States are of considerable interest and concern to the College.

Comments on the ADA Proposal

The College Council with members from all dental specialities has considered the proposals and also the Task Force Report and finds itself in general agreement with both. There are, however, some points of concern.

- 1) Limitation of Practice. The College questions the wisdom of this restriction. In some jurisdictions in Canada, it is illegal for dental associations to insist on limitation of practice by specialists and there have been no reports of any unfortunate consequences, nor are any known to us. In the profession of medicine in Canada, there have never been any such regulations concerning limitation of practice by specialists, and again this is believed to be in the best interest of the general public.

In the view of the College, limitation of practice requirements should be de-emphasized.

- 2) The requirement mentioned in various places in the ADA proposals, e.g. Page 4 lines 1 and 2, that "individuals practicing in the area must provide dental treatment directly to patients."

If interpreted literally this requirement might lead to the abolition of several current specialties.

In Dental Public Health, particularly in the case of those dentists in more senior positions, there is often no direct patient contact. In the opinion of the College, Dental Public Health is a very viable, important and clearly defined specialty, the continued existence of which is essential to the health of the general public.

.../3

Dental radiologists seldom if ever provide 'dental treatment' to their patients as their expertise is chiefly in the area of diagnosis and investigation.

Some oral pathologists confine their activities to the laboratory although many also treat patients directly or supervise their care by others. Again literal application of this requirement might cause difficulties in this specialty.

In the opinion of the College, Dental Radiology, Dental Public Health and Oral Pathology should continue to be recognized as specialties. We agree with the Task Force that Oral Pathology should encompass clinical oral pathology (or oral medicine).

December, 1982



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

OFFICE OF THE PRESIDENT

December 21, 1982

Mr. J.L. Fry,
Deputy Minister,
Health & Welfare Canada
Jeanne Mance Building
Tunney's Pasture
Ottawa, Ontario
K1A 0K9

Dear Mr. Fry:

Re: Report of the Ad Hoc Committee on
National Health Strategies

On August 20, 1982 you sent us a copy of the above-noted Report. In your letter which accompanied the document you asked that any comments the Canadian Dental Association might have be forwarded to the Ad Hoc Committee Secretariat. Towards this end the CDA has circulated the Report to all its corporate members across Canada as well as to other potentially interested groups within the dental profession. This letter, then, represents the considered reaction of the Canadian dental profession to the Ad Hoc Committee's Report.

We would like to make two points about the document. First, we support the general thrust and tone of the Report. It appears to reflect a strategy that not only responds to some of the most significant health problems in Canada, but also sketches out some tentative approaches for dealing with these problems. It is the latter part of this strategy that was missing from earlier government documents.

Second, we draw to your attention the fact that oral diseases and their consequences, a billion dollar plus health problem, appears to be completely and unexplicably neglected by the Ad Hoc Committee. In purely objective terms, we see this as a significant oversight which should be rectified as quickly as possible. Of course, it is a common difficulty for dental health care personnel on the one hand and health care policy analysts on the other to satisfactorily resolve the question of just where dental disease and dental services fit into the broader Canadian health care system. But particularly by those with budget responsibilities for the Canadian health care system, the nation's oral disease burden is seriously underestimated, perhaps only because

.../2

the subject is not central to established patterns of medical, hospital and nursing care. With respect to oral disease then, an understanding of the problem and an appreciation of its potential magnitude are completely absent from the Report.

There are three reasons why the Ad Hoc Committee should in fact emphasize the need to develop health strategies aimed at reducing morbidity, and its sequelae, of oral disease. The first and perhaps most compelling reason relates to the financial burden that oral diseases and their treatment impose on Canadians. Second, some oral diseases are nearly ubiquitous (e.g., dental caries and periodontal disease) and thereby constitute a vast public health problem. Third, the impact of certain oral disease on the overall well-being of individuals is becoming increasingly recognized. This is particularly true in the case of severe malocclusion, viral infections, oral cancer, edentulism, etc.

The Financial Burden

Canadians spent 1.23 billion dollars on dentists' services during 1980. Not only is this a major current expenditure, the amount of money Canadians spend on dentists' services has grown significantly both in absolute and relative terms. In 1960, the public paid 109.6 million dollars per year for dental services and by 1970 this had grown to 265.0 million dollars per annum, an increase of 142 percent in the decade. By 1980 the annual expenditure had increased by 835 million dollars. The 1980 figure, 1.23 billion dollars, was 415 percent higher than that for 1970.

The relative significance of dental care expenditures has also been increasing. For example, recent data indicate that for every 2.6 dollars spent on all physician services combined, 1.0 dollars is spent on dentist services. In 1970 this ratio was closer to 4:1. As a proportion of Canadian health expenditures, dental services have grown from 4.24 percent in 1970 to 5.74 percent in 1980. As a percent of the 1970 gross national product, dental expenditures stood at 0.31 percent versus 0.43 in 1980.

The magnitude and the rate of growth in Canadian expenditures for oral health services is significant for at least three further reasons. First, the high annual cost is generated by only 50 percent of the people who visit the dentist in a given year. If everyone who needed care actually sought and obtained it, the annual dental care expenditures, at least in the short to moderate term, would be higher still. Second, the rapid increase in dental expenditures has occurred during a period when the Canadian population experienced relatively slow growth. Third, unlike the medical services system, the existence of third party dental payment is by no means universal with perhaps fewer than 40 percent of Canadians covered by 1980. However, it is virtually certain that the growth in dental care expenditures during the 1970s is in part explained by the rapid growth in third party dental payment programs during the same decade.

The true social cost of oral diseases and their treatment is under-estimated by strict reliance on expenditure figures. In particular, time lost from work, the cost of travel to and from the dentist, waiting-time, lost schooling, etc., all add to the nation's dental care bill. It has been estimated that the true social cost of dental disease may be 15 to 50 percent higher than the raw annual dental care expenditure data would indicate.

An Ubiquitous Problem

In the main, oral diseases, like diseases of the eye or injuries to the limbs, are not life-threatening. While the latter conditions are potentially more debilitating, dental caries, periodontal disease and to some degree malocclusion are far more common. It is this ubiquitous nature of dental disease that gives it such great impact. As far back as the 1964 Royal Commission on Health Services, it had been learned that on the basis of expenditures on 21 health problems at the time, oral disease ranked third from the top, being preceded only by mental and personality disorders and diseases of the respiratory system.

With respect to dental caries, recent Canadian and American studies have shown that over 90 percent of 13, 14, and 15 year old schoolchildren have experienced tooth decay. Root caries, an emerging problem whose impact is magnified by the general aging of the entire population, affects from 40 to over 70 percent of adults aged 50 years or more. It is these high disease experience rates together with the implication for treatment needs which elevate dental caries to the level of a significant public health concern.

Periodontal disease comprises a number of different yet related conditions which affect the gums and tissues supporting the teeth. Most important are the inflammatory and degenerative diseases such as gingivitis, periodontitis and the less frequent acute necrotizing ulcerative gingivitis. As is the case with caries, the prevalence of periodontal diseases is an age-related event. Various data indicate that among 6 to 11 year old children 39 percent may suffer from gingivitis while among 13 and 14 year olds the prevalence may be 95 percent. Although completely reliable data may not yet exist, possibly over 75 percent of dentate adults suffer from destructive periodontitis. Some have claimed that periodontal disease accounts for more tooth loss in the adult population over 35 years of age than does tooth decay.

Treatment for malocclusion is being sought increasingly by patients of all ages. Unfortunately, relatively little precise knowledge exists as to the prevalence of malocclusion within the population. In the United States, post-1960 studies involving 100 or more 12-18 year olds indicate that malocclusion prevalence estimates range from a low of 46 percent to a high of 95 percent. Whichever estimate is taken, this suggests an enormous health problem, particularly when the nature and cost of treatment is contemplated. And the financial burden of orthodontic care will almost certainly increase if the present tendency to seek treatment continues to grow among children and adults.

.../4

Impact on Individuals

The impact of oral diseases hits some people harder than others. Rampant caries, abscesses and pain strike those children whose parents are not properly informed about dental disease or where children are plainly neglected. Adults who ignore progressing tooth decay in their own mouths will almost certainly face the need for major extractions and for replacement of lost teeth with dentures. Turning to periodontal disease, in its advanced stages it requires treatment that usually involves frequent, uncomfortable and expensive dental procedures, often including surgery. Advanced, untreated periodontal disease causes embarrassment and emotional discomfort to many. In the middle-aged and elderly population periodontal disease is the major cause of tooth loss.

Malocclusions and other dentofacial anomalies have a greater impact on the person than most other oral conditions. The psychological impact of cleft lip and palate on both child and parent has been well documented. Malocclusion in its varying degrees of intensity also affects the self-image of affected individuals. While too little is known about the subject, two sorts of problems appear to arise - those brought about by the response of others to the patient's condition and those brought about by the disabled person's concern about his own deformity.

Oral cancer represents the most extreme impact that a dental condition can have on the individual. Predominantly a disease of the elderly, about 75 percent of oral cancer deaths occur in persons aged 55 years of age and over. In North America, oral cancer accounts for 3 percent of all cancers. Even when oral cancer does not result in death, the destruction caused by the cancer and the mutilation necessitated by the treatment affect the most socially inter-active, the most visible part of the body. As a result, the emotional trauma and psychological harm caused by oral cancer is enormous.

In conclusion, the above considerations lead the Canadian Dental Association to urge the Ad Hoc Committee to amend its Report in order to reflect the significance of oral diseases on the one hand and the need for effective prevention and treatment strategies on the other.

Sincerely yours,

William R. Thompson, D.D.S.
President

WRT/ssd

C.D.S.P.I.
(COUNCIL ON INSURANCE & INVESTMENT)

REPORT OF THE CDSPI (COUNCIL ON
INSURANCE & INVESTMENT TO THE 1983
INTERIM MEETING OF THE CDA BOARD
OF GOVERNORS

Members:

Dr. G. Anthony	- Atlantic Provinces
Dr. G.F. Copithorne	- British Columbia
Dr. R. Dupont	- CDA Representative (Quebec)
Dr. C.R. Hill	- Saskatchewan and Manitoba
Dr. A.G. Leblanc	- Quebec
Dr. R.L. Moran	- CDA Representative (Ontario)
Dr. R.L. Rasmussen	- Alberta (Chairman of the Board of CDSPI)
Dr. R.R. Schiewe	- Ontario
Dr. J. Laporte	- CDA Executive Liaison
Dr. J.C. Giguere	- Vice-President Administration

Members of the Management Committee:

Dr. J.E. Durran
Dr. R.L. Moran
Dr. M.D. Charendoff

1. CDIP Holding Account

You will note in reviewing the 1983 Budget as approved by the CDSPI Directors (Schedule A) that it is a twelve month budget set now on the calendar year.

Previously our year end was March 31st. This did not correspond with the cash flow, invoicing time frames, or insurance plans year. In consultation with our auditors, it was decided and approved by our Directors that a change of year end to December 31 would present more meaningful and logical financial reporting.

2. CDA RRSP

A presentation was made to the Executive Council of CDA on January 29, 1983 with respect to the RRSP funds transfer. (Refer to Executive Council report for details and directions).

3. Experience Reports

As the Program year end is December 31, these reports are not yet available. They will be on hand for the March CDA Board meeting.

C.D.S.P.I.
(COUNCIL ON INSURANCE & INVESTMENT)

2.

4. Graduate "No Cost Insurance" Enrollment

University	1982			1981		
	Eligible	Applications	%	Eligible	Applications	%
U. of B.C.	36	36	100	39	36	92
U. of A.	46	46	100	42	40	95
U. of S.	19	19	100	16	15	94
U. of Manitoba	23	23	100	25	24	96
Western	59	47	79.9	67	42	63
U. of T.	128	107	83.5	132	114	86
McGill	36	36	100	43	36	84
U. of Montreal	71	67	94.4	64	50	78
Laval	24	21	87.5	24	21	87
Dalhousie	<u>22</u>	<u>21</u>	<u>95.5</u>	<u>26</u>	<u>22</u>	<u>85</u>
	464	423	91.2	478	400	83.7

We have monitored the continuing participation of Graduates in the program the year following the No Cost Insurance Package, and can report that 87% of the 1981 Graduates receiving free coverage retained this coverage on a pay basis and, in some cases, increased their coverage in 1982.

5. Applications Statistics

Note the new application statistics as per Schedule B attached.

We are also pleased at this time to report an increase in premium dollars in 1982 over 1981 in excess of 20%.

This increase permits a reduction in outside Administrator's Fees in 1983 of approximately \$30,000. Combining this with the percentage reduction already obtained for 1983, will result in an overall saving on outside Administrator's fees for 1982 and 1983 in the area of \$50,000.

6. Benefit Committee Chairmen

The Chairmen from each province and the Board members from CDSPI are meeting jointly on March 12, 1983. These meetings have proven to be very beneficial to all participants. We get information from those at the local society level and they get some insight into our problems. It is a very open informative meeting.

7. General Insurance

The claims experience of the malpractice section of this coverage is a disaster.

7. General Insurance - continued

As you will recall, under Item 13 in the CDSPI March report to this Board, there were recommendations made and passed with respect to a Loss Prevention Program. As a prelude to the actual Loss Prevention Seminar which is planned for 1983, Mr. Butler was given time on the agenda of the Chief Executive Officers Seminar in December of 1982 held in Montreal. At that time, he presented those present with the facts surrounding the claims problem and distributed a questionnaire. The answers from each province will be of considerable assistance in the development of an agenda for the Seminar and the selection of speakers and the type of information that is required in order to launch an effective Loss Prevention Program. Replies are to be in the CDSPI offices by January 31, 1983 and more information on this Seminar and program will be available for the Board meeting.

The 1982 insurance Certificate relating to Malpractice required the including of a notice that the insurer could cancel the coverage by giving 90 days notice. Under the original contract, there was a cancellation notice period of 180 days. In negotiating the 1983 contract, the insurer wanted 30 days notice, but we were able to obtain the 90 day figure after much discussion.

We have researched and found that the private Malpractice coverage obtained outside the Plan would have a normal cancellation period of 15 days notice, with some carriers permitting 30 days. The 15 to 30 day period appears to be normal for the insurance industry.

We have also research rates for similar coverage on an individual basis and find that they average anywhere from \$200 to \$625, depending on the provinces and the number of staff in the dental office.

We, therefore, feel our current program is very competitive with the marketplace that is available for Malpractice coverage.

8. In-House Administration

We know that it will be of interest to the Board members to know that the computer is "up and running" and that by the time you read this, all participants' files will be transferred to the Dentists' own information storage device. If you have heard anything about the problems that the California Dental Association is presently experiencing in the area of insurance coverage (Schedule C), then the above statement should give you a good feeling.

As you know, it is our intent to assume the administration as of January 1, 1984. It is still our aim to do that with as little confusion to our participants as possible. Ideally, no one will observe any difference, except an improvement in the service response time.

C.D.S.P.I.
(COUNCIL ON INSURANCE & INVESTMENT)

4.

9. Non-Smokers Insurance

The following recommendations were approved by the Executive Council at its January 29th meeting:

"That the following CDIP Non-Smoker Basic Life Rates be implemented effective January 1, 1984:

	<u>Current CDIP Life Rates</u>	<u>Discount Factor</u>	<u>CDIP Non-Smoker Life Rates</u>
Less than 25	\$ 8.56	0%	\$ 8.56
25 - 29	9.68	2	9.48
30 - 34	11.40	4	10.96
35 - 39	14.32	6	13.48
40 - 44	20.76	8	19.12
45 - 49	33.56	10	30.20
50 - 54	53.64	12	47.20
55 - 59	67.00	15	56.96
60 - 64	107.68	7.5	99.60
65 - 69	226.80	0	226.80

"That Non-Smoker refers to an individual who has not smoked cigarettes in the last twelve months."

"That an ongoing Recertification Policy be implemented for a participant who continues to be a non-smoker. This recertification procedure would take place at five year intervals and would be coincident with the time when an individual moves into a new step rate category."

"That appropriate promotion be implemented throughout 1983, to effectively implement these new rates for January 1, 1984.

and further:

Introduce for promotion purposes in 1983 and heavily promote during the year that effective January 1, 1984:

- a) Non-smoker rates will be available;
- b) A 10% increase in life coverage with no medical;
- c) Limit increased from \$370,000 to \$400,000;
- d) Participants can declare eligibility for non-smoker rates in the fall of 1983 to take effect January 1, 1984."

C.D.S.P.I.
(COUNCIL ON INSURANCE & INVESTMENT)

5.

Non-Smoker Rates - continued

There will be NO non-smoker rates available in 1983. We would only promote the change for January 1, 1984 and encourage registration of eligibility during the period noted.

10. Stop-Loss Coverage

Item 13 of the CDSPI report to the CDA Annual Meeting referred to risk analysis. We can report that the analysis of the Long Term Disability component of the program has been completed. As a result of that report, and also as a result of the experience in the pooled portion of the Basic Life Plan the following was accepted by the Executive Council at its January, 1983 meeting:

"That since most insurers in the industry are not prepared to offer any stop-loss coverage for a period of one year (1983 only) we include stop-loss insurance as part of the negotiations to take place in 1983 relating to the new policy contract to become effective January 1, 1984."

11. Office Contents

Executive Council approved CDSPI recommendation of an automatic 10% increase of Office Contents and Business Interruption coverage to those participants on file be implemented to take effect July 1, 1983.

It should be remembered that the above increase, although automatic, is not mandatory, and our participants are so informed.

12. Office Overhead Insurance Refunds

Review of records and procedures late in 1982 indicated that over the past four years, premium figures for Office Overhead Insurance coverage for those participants 65 years of age and over had incorrectly been recorded in the computer of Reed Stenhouse (our outside Administrator).

This error was discovered by CDSPI in the verification of participants' files at the time of conversion to in-house administration.

66 individuals were involved, totalling \$12,000 in overcharge of premium on this coverage.

The Directors of CDSPI approved the recommendation of the Management Committee that full premium refunds plus interest should be given to the participants involved and such refunds were sent in mid-January.

13. Quebec Blue Cross

As of January 1, 1983, the QDSA took over the administration of the Quebec Blue Cross. CDSPI endeavoured to ensure that the current participants in the Plan were able to maintain their current coverage based on their CDA eligibility.

CDSPI sent a notice to all CDIP participants in Quebec informing them of their eligibility for and ownership of programs under CDIP in order to dispel their concerns relating to their CDIP insurance coverage.

14. Promotion

In late 1982, CDSPI conducted extensive reviews of the format of advertising and promotion being used for CDIP.

As a result of this review, a new concept for promoting the Plans was developed and the 1983 advertising program approved.

We look forward to launching this new format in the Spring of 1983.

15. Contract Renegotiations

At December 31, 1983, the current contracts with Imperial Life (Life, Long Term Disability, Office Overhead coverage) and Seaboard (Accidental Death and Dismemberment) expire.

We will be actively involved in the renegotiation discussions with these insurers by March of 1983, and will be presenting our recommendations in our report to the Executive Council in July of 1983 and to the CDA Board of Governors at the Annual Meeting in September of 1983.

Dr. Dennis Wells has retired as a Director of CDSPI. On behalf of the CDSPI Board of Directors, I would like to record our thanks for his contribution to CDSPI during the time he sat as a director.

Respectfully submitted

J.E. Durran, D.D.S.
President - CDSPI

ADOPTION OF REPORT

The Board of Governors accepts the report of the CDSPI (Council on Insurance and Investments) with thanks.

SCHEDULE A

PROMOTION FUND ACCOUNT

APPROVED BUDGET

JANUARY 1, 1983 - DECEMBER 31, 1983

	Reference Schedule	
<u>Revenue:</u>		
Transfer from Insurance/	Fund	
Investment Fund	Statement	\$ 176,706
Interest Earned	A	<u>16,114</u>
		192,820
<u>Expenditures:</u>		
Advertising	B	74,508
Announcement of changes in		
General Insurance	C	2,000
Articles	D	5,000
Audit	E	6,900
Benefit Committee	F	12,500
Contingency	G	9,000
Displays	H	9,600
General	I	3,700
Graduates	J	35,700
Non-Smoker Life Promotion	K	13,500
O.D.A. Extended Health Care Plan	L	5,250
R.R.S.P.	M	8,300
Reprints of Ads for Distribution	N	750
Selective Mailings	O	2,000
Special Promotion Office		
Contents Insurance	P	4,000
Travel and Public Relations	Q	<u>16,010</u>
		208,718
<u>Approved Budget (Deficiency) of</u>		
<u>Expenditures Over Revenue</u>		\$ <u>(15,898)</u>

PROMOTION FUND ACCOUNTAPPROVED BUDGETJANUARY 1, 1983 - DECEMBER 31, 1983DETAILED BUDGET ANALYSIS

(All \$ are rounded when transferred to Budget)

ReferenceA Interest earned

Based on estimate of 10% average interest for
 period on cash flow basis at 2% \$ 16,114

B Advertising

Advertising in CDA Journal -
 24 full page ads at \$1,022 = \$24,528
 12 half page ads at \$835 = \$10,020 \$ 34,548
 Plus development, design and
 artwork based on 1983 rates 29,580 64,128

Advertising in ODA Journal - 12 full page
 at the 1983 rate of \$280 3,360

Advertising in QDSA - 3 full page inserts at \$300
 - estimation on current reprinting costs plus
 15% increase 900

Student Publications - estimate 500

Convention Programs - estimate 1,120

Advertising agency fees 4,500

\$ 74,508

C Announcement of Changes in General Insurance

Estimation of costs - postage not included
 as announcement will be mailed with 1983
 premium notices \$ 2,000

- 2 -

ReferenceD Articles

Estimation of cost for articles in CDA Journal
and other publications (includes costs for
preparation, translation, release fees to
parties named in articles, etc.) \$ 5,000

E Audit (of CDIP Plans)

Estimation of Millard, DesLauriers & Shoemaker's
fees for 1982 plus 15% increase \$ 6,900

F Benefit Committee

Benefit Committee expenses based on
attendance at the 1982 meeting \$ 10,000

Bulletins for the Benefit Committee
Chairmen - estimation 2,500 \$ 12,500

G Contingency

To cover any unforeseen promotion projects
that may arise during 1983 \$ 9,000

H Display

Expo System - new material required,
blow-up of ads, etc. - estimated costs \$ 1,200

Staffing display booth 1,500

Rent of booth space - CDA Convention,
Journée Dentaire, ODA Convention, and
Western Canada Conference - estimated
on current costs plus 15% increase 2,000

Rental of Equipment for Conventions
(chairs, tables, lighting, etc.) 2,000

Packing and shipping of binders to
Vancouver - this expense could possibly
be reimbursed by CDA 1,200

Shipping charges for shipping Expo Systems
and materials to Convention- based on last
year's costs plus 15% increase 1,700 \$ 9,600

- 3 -

ReferenceI General

Courier Services - based on current costs plus 15% increase	\$ 700	
Hand-outs, stickers, etc. - new expense estimate	<u>3,000</u>	\$ <u>3,700</u>

J Graduates

Cost of printing new material for 1984 Graduates - estimation	\$ 4,000	
Cost of printing material for undergraduates	1,500	
Cost of 1983 Graduates Programs based on the participation of 450 graduates	<u>30,200</u>	\$ <u>35,700</u>

K Non-Smoker Life Promotion

Teaser ads, follow-up notices and mailings - estimation of costs for ads and the development, graphics and printing of material	\$ 7,500	
- postage 60¢ x 10,000	<u>6,000</u>	\$ <u>13,500</u>

L ODA Extended Health Care Plan Promotion

Four premium notice inserts - estimate of development, graphics and printing costs	\$ 3,600	
New brochures and claim forms based on quotes from printer for development, graphics and printing costs	1,350	
Application forms based on estimation of printing costs	<u>300</u>	\$ <u>5,250</u>

M R.R.S.P.

R.R.S.P. Annual Report - based on 1982 cost for printing, translation and postage plus 15% increase	\$ 3,300	
New brochures estimations	<u>5,000</u>	\$ <u>8,300</u>

- 4 -

Reference

<u>N</u>	<u>Reprints of Ads for Distribution</u>		
	Reproduction costs - estimation	\$	<u>750</u>
<u>O</u>	<u>Selective Mailings</u>	\$	<u>2,000</u>
<u>P</u>	<u>Special Promotion Office Contents Insurance</u>		
	Estimate based on promotion done in the form of premium notice stuffer or special ads in the CDA Journal	\$	<u>4,000</u>
<u>Q</u>	<u>Travel and Public Relations</u>		
	Air Fare - based on current rates plus 15% increase	\$ 6,455	
	Hotel - based on \$125 in Vancouver and \$115 in the rest of Canada	3,925	
	Meals and Sundry - estimate	3,030	
	Public Relations - based on approximately \$50 a week	<u>2,600</u>	\$ <u>16,010</u>

STATISTICS OF APPLICATIONS BY PLAN
TO NOVEMBER 30, 1982

	<u>1982</u>	<u>1981</u>	<u>1980</u>
Life	970	765	854
Dependent Life	165	172	172
AD & D	574	561	542
LTD	1,075	931	837
O/O	519	573	554
O/C	406	444	429
Business Interruption	268	354	292
CGL	396	336	324
MLP	462	374	422

STATISTICS OF NEW PREMIUM \$ BY PLAN
TO NOVEMBER 30, 1982

	<u>1982</u>	<u>1981</u>	<u>1980</u>
Life	236,168	177,350	206,509
Dependent Life	15,442	14,491	13,551
AD & D	31,022	32,519	28,367
LTD	444,926	360,672	329,927
O/O	179,124	161,628	155,985
O/C	95,664	86,143	79,205
Business Interruption	26,773	30,956	23,204
CGL	2,641	1,944	1,795
MLP	41,043	29,085	32,906

APPLICATION STATISTICS BY APPLICATIONS
TO NOVEMBER 30, 1982

	<u>1982</u>	<u>11 mos.</u>	<u>1981</u>	<u>11 mos.</u>	<u>1980</u>	<u>11 mos.</u>
January	409		335		280	
February	333		247		242	
March	249		198		167	
April	143		144		132	
May	117		141		249	
June	174		193		217	
July	184		64		137	
August	157		132		159	
September	204		251		159	
October	226		173		271	
November	237	<u>2,433</u>	213	<u>2,091</u>	202	<u>2,215</u>
December	-----		324		277	
TOTAL			<u>2,415</u>		<u>2,492</u>	

CALIFORNIA DENTAL ASSOCIATION JOURNAL (CDA)

In response to what the court papers have called "unsurpassed illegal action" by William M. Mercer, Inc. (Marsh & McLennan Assoc.), CDA has filed a massive lawsuit against Mercer. Also joining CDA as a plaintiff in the suit is National Casualty Company, the underwriter of the CDA-sponsored disability insurance program. The complaint charges Mercer with, among other things,

tween CDA and Mercer, CDA hired Mercer to perform broker/administrator services for CDA's sponsored insurance programs until January 1, 1984.

On September 11, CDA's Board of Trustees adopted two resolutions, the effects of which were:

(1) To name The Dentists' Company (a CDA subsidiary) to succeed

CDA CHARGES MERCER WITH ILLEGAL ACTIONS; OBTAINS TEMPORARY RESTRAINING ORDER

by Jesse Miller, Esq.,
CDA Legal Counsel

On September 29, in response to a lawsuit filed by CDA and National Casualty Company, the Los Angeles Superior Court issued a Temporary Restraining Order against William M. Mercer, Inc., (Marsh & McLennan Assoc.) prohibiting Mercer and its affiliates from taking certain actions in connection with the CDA-sponsored insurance programs.

Among a number of other things, Mercer was enjoined from causing any "forfeiture, lapse, termination, alteration or change in the insurance carriers and/or policies of insurance" previously issued to members under the CDA-sponsored programs except upon specific written request.

breach of contract, unfair business practices, intentional interference with contractual relations, injurious falsehood and violations of the California Insurance Code. The complaint also seeks various injunctions against Mercer.

The papers on file with the court detail the following conduct:

Sworn statements signed by a Mercer vice-president (filed with the court) describe the history of the CDA-sponsored programs and recognize that, "CDA's involvement is unsurpassed by any association sponsoring insurance programs in the country.

"CDA, as sponsor of its various insurance programs, retained and exercises the ultimate decisions as to the selection of carriers and acceptance of terms for underwriting agreements. The acquisition and execution of underwriting agreements were through CDA broker/administrators who represented the interests of CDA as the "buyer" on behalf of its members. In this manner, the selection and duration of CDA's relationship with the insurance carriers for each of the CDA-sponsored programs was exercised by CDA. CDA has and presently maintains the ultimate decisions regarding the initiation, duration and discontinuance of each of its sponsored programs."

Through a written contract be-

Mercer as broker of record for all CDA-sponsored plans effective on January 1, 1984 (expiration date of the CDA/Mercer contract).

(2) To award a consulting contract (to plan the orderly transfer of broker activities to The Dentists' Company) to Johnson & Higgins, the company that has administered The Dentists Insurance Company since it began in 1980.

Two days later, on September 13, Mercer chose to violate its written agreement with CDA and terminated the contract without notice.

Thereafter, Mercer has sought to use the position of trust in which it was placed by CDA to destroy the CDA-sponsored programs and to compete unfairly and deceptively in an attempt to siphon CDA members into Mercer's own "Marsh & McLennan trust."

Mercer has refused to grant CDA access to the records of the CDA-sponsored program, despite two contractual provisions making it clear that such records are CDA's property and despite Mercer's own vice-president's sworn statements that "these insurance records were the property of the California Dental Association..." and that such records are "... absolutely vital to the transition of the CDA-sponsored insurance programs ..."

Mercer has made blatant misrep-

representations to CDA members and component dental societies in an attempt to create confusion about association-sponsored insurance programs and to cause members to enroll, often unwittingly, in Mercer's own programs.

Mercer has attempted to con-

a cruel hoax, calculated to cause CDA members to cease obtaining their insurance through CDA-sponsored insurance programs and instead obtaining their insurance from the M&M[Mercer]-sponsored insurance program," the papers state.

On September 13, Mercer sent

administrator agreement, in such a way as to lead CDA members to believe that the CDA-sponsored insurance programs were undergoing substantial change or being discontinued.

"In fact, Mercer knew that the only change taking place at that time was

CDA CHARGES MERCER WITH ILLEGAL ACTIONS

vince insurance carriers that underwrite CDA-sponsored insurance policies to terminate their agreements with CDA.

The court papers further state:

"Mercer has not only stolen the proprietary information of both CDA and National Casualty and converted it to its own use, but has additionally taken very drastic and dramatic actions to disable both CDA's and National Casualty's ability to utilize their own proprietary information to service those customers of CDA and National Casualty that Mercer is intent upon stealing.

"Caught in the middle of this power play are approximately 10,000 CDA-member insureds who have obtained insurance through CDA's sponsored programs. Unbeknownst to them, Mercer is stealing their business from CDA and National Casualty, substituting new insurance policies and insurance carriers, all in its attempt to divert for its own benefit the insurance business of CDA members. This action is very likely to the detriment of the unknown CDA members/insureds who have paid or may pay current premiums."

CDA's court papers assert that Mercer practiced deceit, as well, by failing to notify members that their original sponsored insurance programs were no longer available through Mercer.

"Indeed, Mercer was engaged in

letters to CDA's membership alluding to the possible demise of the association's insurance programs. According to the court papers, "Mercer (in its letter) misrepresented to CDA members that: 'at this time, there is uncertainty as to what your association will be prepared to provide — how long that will take — and what it will cost.'"

Mercer also contacted CDA's component dental societies with letters that falsely claimed: "It is unknown to us if CDA will endorse other programs to compete with the programs we have offered to your members for almost 40 years. It is possible that CDA will decide to remove itself from the sponsorship of insurance programs. It is uncertain yet what alternatives CDA is prepared to offer and when they might be available. So in the interim, Marsh & McLennan Assoc. (Mercer) wishes to offer you the opportunity to endorse our programs to your members."

CDA's complaint charges that, through its letters to dentists and components, "Mercer... was misrepresenting to CDA-member insureds the state of events, Capitalizing upon the small amount of confusion that would result due to the function of broker/administrator being turned over to Johnson & Higgins, Mercer was characterizing this change, which resulted entirely from Mercer's own breach of the broker/

the switch from Mercer to Johnson & Higgins as broker/administrator."

In addition, the court papers report that, "When CDA members called Mercer to find out what insurance Mercer was now providing, they were misinformed by Mercer. Mercer represented that it was offering exactly the same policies underwritten by exactly the same carriers as were offered in the CDA-sponsored insurance programs."

"Yet this is totally false. The disability policies offered by Mercer are not the National Casualty policies which were offered under the CDA-sponsored insurance program. Similarly, many of the policies in the CDA-sponsored insurance programs were group policies issued directly to CDA as the group policyholder. Obviously, those policies under the M&M[Mercer]-sponsored insurance program were no longer the CDA group policies.

"Thus, a very blatant misrepresentation was being made to CDA members to deceive them into accepting the M&M[Mercer]-sponsored insurance program rather than demand their CDA-sponsored insurance programs."

The court set a hearing for October 20, to determine whether to expand, extend or remove the Temporary Restraining Order against Mercer. A story on results of that hearing is on page 12 of this issue of the *Journal*. Δ

Court Grants CDA Preliminary Injunction Against Mercer

On October 20, 1982, the Los Angeles Superior Court, after considering extensive briefs and oral arguments, granted CDA's application for preliminary injunctions against Mercer.

The injunctions remain in effect while the lawsuit (CDA v Mercer) is pending unless later modified by the court. An article describing the lawsuit is on page 35 of this issue of the *Journal*.

The major issues addressed by the court in its Minute Order were the prevention of the destruction of records by Mercer, Mercer's refusal to grant access to insurance data and records relating to CDA-Sponsored Insurance Programs and Mercer's claimed right to "switch" CDA member/insureds out of CDA-Sponsored policies into other policies "recommended" by Mercer.

The court's order, among other things, does the following:

- Prohibits Mercer from destroying records pertaining to the CDA-Sponsored Insurance Programs.
- Mandates that Mercer shall not fail to make available to CDA specified detailed data from Mercer's records pertaining to any member/insured under any CDA-Sponsored Insurance Program.

- Provides that Mercer "shall not cause any CDA member to cease to be insured under any insurance policy issued on or before September 1, 1982, pursuant to a program sponsored by CDA or to be insured under any other policy without having received from the insured written and signed instructions directing such change."

- Directs that Mercer shall not fail to pay over on October 30, 1982, to each insurance carrier under a CDA-Sponsored Program all insurance premiums Mercer has received from any CDA member/insured under any CDA-Sponsored Program, in the absence of contrary written instructions from the insured.

The intended effects of the injunction are: 1) to prevent a lapse of coverage in CDA-Sponsored Programs as to which Mercer has received a timely premium payment; 2) to disable Mercer from switching an insured (who does not consent in writing to be switched) out of a CDA-Sponsored Program; and 3) to require Mercer to provide data which permits an easier transfer of the brokerage function to CDA's new broker (Johnson & Higgins) to enable CDA to continue its Sponsored Insurance Program for your benefit.

Answers On CDA's Sponsored Insurance Programs

Editor's Note: The following information was prepared in mid-October in order to meet the Journal's press deadline. CDA members will be kept informed of new developments through letters from the association and articles in future issues of the Journal. If you have further questions about CDA's sponsored insurance programs, you may contact the programs' administrator, Johnson & Higgins, at (415) 981-6700.

Q: Why did William Mercer Inc. (Marsh & McLennan Assoc.) break away from the CDA-sponsored insurance plans?

A: On September 11, 1982, CDA's Board of Trustees named The Dentists' Company (the association's new subsidiary corporation) as broker of record for all CDA-sponsored plans. The changeover to TDC was to become effective January 1, 1984, the date the CDA/Mercer contract expires.

Also on September 11, CDA awarded a consulting contract — to plan the transfer of broker activities to TDC — to Johnson & Higgins, the firm that has administered The Dentists Insurance Company's account since the company was formed in 1980. When Mercer learned that CDA had refused its bid for the consulting contract and realized that it would lose its remaining business with the CDA-sponsored insurance plans when its present contract expired, it chose to sever its relationship with CDA.

There is quite a bit of evidence that suggests that Mercer had planned ahead for this eventuality, because just two days after the trustees' decision, Mercer mailed a special letter to CDA members announcing the company's termination of its contract with CDA and attempting to trap them into switching from the association-sponsored programs to Mercer-sponsored programs.

Q: If I continue my insurance through Mercer, will I have exactly the same insurance as when Mercer was the broker/administrator of CDA's sponsored insurance programs?

A: Probably not. At least two of the insurance companies that underwrite the CDA-sponsored plans have declined to continue writing the plans for Mercer. The coverages provided by those two companies are the professional overhead expense plan, the office employee plan and the disability income plan. Mercer has chosen different carriers to underwrite these programs. Coverage from Mercer's new carriers may or may not be the same.

Q: Should I remain with the CDA-sponsored insurance programs?

A: Yes. CDA believes it is in your best interest to obtain your insurance through the association's sponsored plans for these reasons:

- Group purchasing power: The group purchasing power of the association assures that you will get the most for your premium dollars.

- Claims assistance: Under the CDA-sponsored programs, if you have a discrepancy in the handling of a claim, you will benefit not only from the support of your broker, but also from the backing of CDA in reaching an equitable solution to the problem.

- Council on Insurance control: CDA's Council on Insurance, composed of your dentist-colleagues, monitors the association-sponsored programs and is accountable to you for providing the coverages you want. The council spends many hours carefully selecting and screening CDA insurance plans and choosing reputable companies to provide them.

Under the direction of the council, CDA will continue to offer sponsored insurance programs that are tailored to meet your needs. By contrast, under a nonsponsored program, you are at the mercy of the broker and the insurance salesman.

- Financial considerations: The commissions on the CDA-sponsored insurance plans currently generate a net income before taxes of up to \$1 million annually. Your continued enrollment in the CDA-sponsored programs will help The Dentists' Company reach its primary goal — to use the income from the sponsored plans to stabilize members' dues.

Q: How can CDA manage the type of complex brokerage operation that TDC will be undertaking?

A: Three years ago, the membership voiced similar concerns about the formation of The Dentists Insurance Company. But today, we have our own professional liability company — TDIC is a reality. With the continued support of CDA members, the association can provide the same high-quality service in the management of all our sponsored insurance programs.

Q: Now that Mercer is no longer CDA's broker, what should I do if I have a claim?

A: Telephone Johnson & Higgins (see Editor's Note at the beginning of this article) if you have a claim under any of your CDA-sponsored coverages. Depending on the particular circumstances of your claim and when it occurred, it may have to be referred to Mercer. In any case, Johnson & Higgins will guide you on the proper handling of your claim.

Q: What should I do if I have an ongoing accounting or claim problem with Mercer that had not been resolved prior to Mercer cancelling its contract with CDA?

A: Any long-standing problems you may have with Mercer, such as a billing error on a past invoice or a discrepancy on a previous claim reimbursement, you must resolve through Mercer. Johnson & Higgins may be able to advise you on such problems, but won't be able to solve them.



California
Dental
Association

Prepared by the
Council on Insurance
For the November 1982
CDA Journal

Ross Prout, DDS, chairman,
Council on Insurance
Russell Goldberg, Director

CDA JOURNAL

INSURANCE NEWS

Dear CDA Member:

On September 13, the William Mercer Co. (Marsh and McLennan Associates), the former broker/administrator for CDA-sponsored insurance programs, launched an attack against your association.

At this point in time, you are probably aware that Mercer has severed its ties with CDA and is actively competing against your association for control of the 13 insurance programs offered to members. This special edition of "Insurance News" is devoted to updating you on how the association is responding to Mercer's actions and what we are doing to protect you and your insurance needs. I urge you to read this section carefully and to contact CDA's sponsored insurance plans if you have further questions. The phone number is listed on the next page.

Here's a brief recap of the events that have led to the current situation:

The Dentists' Company was formed in April 1982 as a wholly-owned subsidiary of the California Dental Association to provide a wide range of services to CDA members. TDC will plan and implement projects with the goal of providing high-quality services at a competitive fee. Net profits from TDC activities will be used to assure company stability and growth and to return funds to CDA, the sole stockholder, for support of association programs and services. Such support is intended to control dues costs for CDA members.

Among other activities, on January 1, 1984, TDC planned to take over broker activities for all of CDA's sponsored insurance programs. Three companies — Johnson & Higgins, William Mercer and Glenn, Nyhan and Associates — bid to be the temporary administrator and plan the transfer of activities to TDC beginning January 1, 1984.

During its September session, CDA's Board of Trustees accepted Johnson & Higgins' bid. As I'm sure you're aware, Johnson & Higgins did an outstanding job of aiding the association to develop The Dentists Insurance Company, CDA's professional liability insurance program, and continues to administer that company, which has garnered high praise from the member-subscribers it serves.

When Mercer learned that its bid had not been accepted, it chose to break its contract with CDA. Mercer's contract had an expiration date of January 1, 1984. Immediately following the announcement of the trustees' decision, Mercer sent bills to CDA members and urged them to switch from subscribing to CDA-sponsored insurance to Mercer-sponsored programs. That billing was deceptive in nature, in that, just before communicating with CDA dentists, Mercer had changed the insurers for three of the sponsored programs without informing member-subscribers.

CDA moved quickly to inform you of what had happened, to urge you to continue your support of association-sponsored programs and to implement a new mechanism for serving your insurance needs.

That's the background. At present, we're faced with a unique opportunity to control our own insurance destiny.

We've already succeeded in doing so with TDIC. The formation of the first dentist-owned, dentist-controlled malpractice insurance company in the nation was a marvelous accomplishment that provides a high level of service for insured members.

We now have been given a new opportunity — perhaps a little sooner than we'd originally planned — to create a dentist-controlled brokerage service that will serve CDA members with billing, collecting and client counseling. We need your continued support for this project. Let's work together to reach our common goal of providing good, affordable insurance coverage that meets both your professional and personal needs.

I have no doubt that we can prove, once again, that we, as dentists in the State of California, can successfully control our destiny in the areas where we must control it.

Sincerely,

Arthur A. Dugoni, DDS
President, California Dental Association

LIFE EXPERIENCE REPORT

	1982			
	<u>March</u>	<u>June</u>	<u>September</u>	<u>* December</u>
Earned Premium to date	\$ 366,422	\$ 623,496	\$ 1,143,693	\$ 1,582,259
Less: claims paid to date	3,248	133,248	409,748	792,500
<u>Change in reserves:</u>				
- Level premium reserves	35,502	42,590	46,747	50,904
- Est. death benefits reserves	202,542	173,579	394,449	338,364
- Incurred but not reported claims reserve	(9,108)	(35,408)	25,466	34,958
- Rate Stabilization Reserve	<u>(30,360)</u>	<u>(118,027)</u>	<u>84,886</u>	<u>116,528</u>
Sub-total	164,598	427,514	182,397	249,005
Less: <u>Retention Charges:</u>				
- Administration - Imperial	12,642	23,069	42,317	50,903
- 15% gross up (R.S.A. & C.D.S.P.I.)	47,818	81,367	149,252	206,413
- Premium tax	5,563	12,470	22,874	31,645
- Profit and Contingency	3,664	6,235	11,437	13,758
- Miscellaneous	-	-	-	-
Plus: Interest credit	<u>159,162</u>	<u>335,055</u>	<u>501,982</u>	<u>686,466</u>
Result of total operation	<u>254,073</u>	<u>639,428</u>	<u>458,499</u>	<u>632,752</u>

SUMMARY

Annualized premiums	<u>1,408,080</u>	<u>1,232,746</u>	<u>1,638,572</u>	<u>1,701,856</u>
Level premium reserves	301,410	308,499	312,656	316,813
Est. death benefits reserves	889,523	860,560	1,081,430	1,025,345
I.B.N.R. Claims Reserve	211,212	184,912	245,786	255,278
Total Reserves	<u>1,402,145</u>	<u>1,353,971</u>	<u>1,639,872</u>	<u>1,597,436</u>
Rate Stabilization Reserve	704,040	616,373	819,286	850,928
Experience Surplus	690,118	854,261	506,405	496,174
Investment Surplus	<u>1,720,804</u>	<u>1,942,016</u>	<u>2,108,943</u>	<u>2,293,427</u>
Contingency Reserve	<u>3,114,962</u>	<u>3,412,650</u>	<u>3,434,634</u>	<u>3,640,529</u>

* Subject to change upon receipt of Annual Report.

LTD EXPERIENCE REPORT

	1982			
	March	June	September	*** December
Earned Premium to date	\$ 672,481	\$ 1,357,810	\$ 2,415,178	\$ 3,369,653
Less: claims paid to date	420,617	769,513	1,276,925	1,768,031
Change in reserves:				
- Incurred but not reported claims reserve	--	75,649	7,102	29,954
- Open claims reserve	<u>611,700</u>	<u>1,535,281</u>	<u>1,779,689</u>	<u>1,757,005</u>
Sub-total	(359,836)	(1,022,633)	(648,538)	(185,337)
Less: <u>Retention Charges:</u>				
- Administration - Imperial	4,385	8,854	15,750	21,945
- 15% gross up (R.S.A. & C.D.S.P.I.)	87,759	177,195	315,181	443,604
- Premium tax	13,450	27,156	48,304	67,393
- Underwriting fees	8,465	12,586	17,886	19,326
- Medical expense fees	7,049	12,403	29,593	32,902
- Claims administration	13,209	22,707	35,667	38,538
- Profit and Contingency	7,309	14,758	26,250	36,576
- Claimant visits	--	--	--	--
Plus: Interest credit	<u>164,228</u>	<u>395,018</u>	<u>616,918</u>	<u>827,309</u>
Result of total operations:	<u>(337,234)</u>	<u>(903,274)</u>	<u>(520,251)</u>	<u>(18,312)</u>

SUMMARY

<u>Annualized premiums</u>	<u>2,630,468</u>	<u>2,933,063</u>	<u>3,323,599</u>	<u>3,437,857</u>
I.B.N.R. Claims Reserve	657,617	733,266	664,720 **	687,571
Open Claims Reserve	<u>4,385,907</u>	<u>5,309,488</u>	<u>5,553,896</u>	<u>5,531,212</u>
Total Reserves	<u>5,043,524</u>	<u>6,042,754</u>	<u>6,218,616</u>	<u>6,218,783</u>
Rate Stabilization Reserve *	\$ <u>(104,738)</u>	\$ <u>(670,778)</u>	\$ <u>(287,755)</u>	\$ <u>214,184</u>
<u>Transfer from Citadel</u>				<u>328,451</u>
<u>Graduates Coverage</u>				<u>41,523</u>

* Includes all previous Citadel transfers.

** Reduced from 25% to 20% effective 30.9.82

*** Subject to change upon receipt of Annual Report

OFFICE OVERHEAD EXPERIENCE REPORT

	1982			
	<u>March</u>	<u>June</u>	<u>September</u>	<u>* December</u>
Earned Premium to date	\$ 284,619	\$ 574,677	\$ 1,028,140	\$ 1,414,082
Less: claims paid to date	166,152	303,973	504,411	733,942
<u>Change in reserves:</u>				
- Incurred but not reported claims reserve	-	6,919	(21,960)	(16,439)
- Open claims reserve	<u>87,225</u>	<u>136,861</u>	<u>149,996</u>	<u>69,698</u>
Sub-total	31,242	126,924	395,693	626,881
Less: <u>Retention Charges:</u>				
- Administration - Imperial	1,856	3,748	6,705	9,212
- 15% gross up (R.S.A. & C.D.S.P.I.)	37,143	74,995	134,172	185,800
- Premium tax	5,692	11,494	20,563	28,282
- Underwriting fees	3,567	5,302	7,536	7,961
- Medical expense fees	2,970	5,226	12,467	13,808
- Claims administration	5,565	9,567	15,027	15,875
- Profit and Contingency	3,093	6,246	11,175	15,354
- Claimant visits	-	-	-	-
Plus: Interest credit	<u>69,189</u>	<u>166,421</u>	<u>259,907</u>	<u>343,602</u>
<u>Result of total operations:</u>	<u>40,545</u>	<u>176,767</u>	<u>447,955</u>	<u>694,691</u>

SUMMARY

<u>Annualized premiums,</u>	<u>1,208,020</u>	<u>1,235,695</u>	<u>1,400,227</u>	<u>1,427,829</u>
I.B.N.R. Claims Reserve	302,005	308,924	280,045	285,566
Open Claims Reserve	<u>235,713</u>	<u>285,349</u>	<u>298,484</u>	<u>218,186</u>
Total Reserves	<u>537,718</u>	<u>594,273</u>	<u>578,529</u>	<u>503,752</u>
Rate Stabilization Reserve	\$ <u>1,159,532</u>	\$ <u>1,295,754</u>	\$ <u>1,566,942</u>	\$ <u>1,813,678</u>

* Subject to change upon receipt of Annual Report

CONSTITUTION & BY-LAWS

REPORT OF THE CDA COUNCIL ON CONSTITUTION & BY-LAWS TO THE 1983 INTERIM BOARD OF GOVERNORS

Members: Dr. W.D. McDougall, British Columbia, Chairman
Dr. G. Anthony, Newfoundland
Dr. B.M. Jackson, Ontario
Dr. G.H. Peacock, Saskatchewan

Dr. B.W. Holmes, Executive Liaison

Council Meeting

Since the 1982 Annual Board of Governors meeting, Council met once, that being on October 22nd, 1982.

Revision of CDA Constitution and By-laws

In accordance with the direction received at the 1982 Board of Governors meeting, copies of the July, 1982 revised constitution and by-laws were forwarded to Governors for comment. Council Chairmen received those sections of the by-laws which pertained to their individual councils and were also requested to comment. Corporate Members were forwarded a copy of the revised document.

Council subsequently met to consider recommendations and requested the advice of the Executive Council on certain points which required policy decisions.

In compliance with Sturgis Standard Code of Parliamentary Procedure, the Constitution and By-laws are considered to be rewritten for clarity and organization and the attached document is the result of careful review and examination.

The Board considered the recommendations presented and the following is a report of the adoption of By-Law No. 1 of the Canadian Dental Association.

RESOLVED:

THAT the amendments set forth in the Report of the Council on Constitution & By-laws dated January, 1983 (as further amended in March, 1983) be approved; and

THAT the consolidation of those amendments and the existing by-law of the Association be approved and adopted as By-law No. 1 of the Association.

Adopted

Respectfully submitted

W.D. McDougall, Chairman
Council on Constitution
& By-laws

ADOPTION OF REPORT

The Board of Governors accepts the Report of the Council on Constitution and By-laws with appreciation for the execution of a great deal of work on the revised document.

CDA CONSTITUTION AND BY-LAWS

ADOPTION OF MARCH 1983 BY-LAW NO. 1

In keeping with Sturgis Standard Code of Parliamentary Procedure a copy of the proposed revision with notice of the date when it would be considered and voted on was sent to each member in advance of the meeting and explanations were provided where necessary.

Certain portions of By-law No. 1 had been rewritten for clarity or reorganization and minor deletions had been made where the content was now obsolete.

Addendum I contains resolutions relating to policy amendments to By-law No. 1, as incorporated in Resolution 83.9 of the Interim Board of Governors meeting.

Thereafter By-law No. 1 was adopted by the Board of Governors and the complete document, as approved, is incorporated in the September, 1983 section of these Transactions.

A revised set of by-laws automatically becomes effective immediately after the vote adopting the new revision.

The Board of Governors, however, directed that the Adopted By-law No. 1 be circulated to corporate members, council chairmen and governors with a request for further input because it became apparent at the meeting that other amendments may be desirable.

Note: According to Sturgis, the original by-law (1979) was not before the assembly for consideration and the revision proposed and subsequently adopted, is a new set of by-laws.

RESOLUTION NO. 83.9

RESOLVED:

THAT Article IV - Objects and Purposes,
Sections (i) and (j) read:

i) to promote the delivery of high quality
comprehensive dental (oral) health care
service to all residents of Canada;

ADOPTED

j) to strive to provide all residents of
Canada high quality comprehensive
dental (oral) health care service.

(DEFEATED)

THAT Article VIII - Board of Governors,
Section 2 e) read:

No member of the Association shall be eligible
to be a member of the Board of Governors for
more than SIX CONSECUTIVE YEARS, unless he is
elected to the office of President-Elect in
which case he shall automatically remain on
the Board of Governors for three additional
years from the time he becomes President-
Elect OR IF HE IS COMPLETING A CURRENT TERM
ON EXECUTIVE COUNCIL.

(DEFEATED)

THAT Article VIII - Board of Governors,
Section 5 g) read:

Unless inconsistent with these by-laws,
the Sturgis Standard Code of Parliamentary
Procedure (Second Edition) will apply.

ADOPTED

BY-LAWS RESOLUTIONS ... continued

RESOLVED:

THAT Article IX - Executive Council,
Section 2 read:

The Executive Council shall consist of the President, Immediate Past President, President-Elect and six additional members. The President-Elect and six additional members shall be elected by the Board of Governors from its membership. THE PROVINCE FROM WHICH A MEMBER IS LICENSED at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The six additional members SHALL consist of one each from the following regions: a) to f) - unchanged.

ADOPTED

THAT Article IX - Executive Council,
Section 8 m) read:

to grant awards from time to time in accordance with guidelines established by the Board of Governors

ADOPTED

THAT Article XIII - Indemnity of Governors & Officers read:

Subject to the provisions of the Canada Corporations Act, every governor and officer of the Association, every former governor or officer of the Association and his heirs and legal representatives shall, from time to time, be indemnified and saved harmless by the Association from and against all costs, charges and expenses, including an amount paid to settle an action or satisfy a judgment, reasonably incurred by him in respect of

... continued

BY-LAWS RESOLUTIONS ... continued

RESOLVED: (Indemnity of Governors & Officers continued)

any civil, criminal or administrative action or proceeding to which he is made a party by reason of being or having been a governor or officer of the Association, if,

- a) he acted honestly and in good faith with a view to the best interests of the Association, and*
- b) in the case of a criminal or administrative action or proceeding that is enforced by a monetary penalty, he had reasonable grounds for believing that his conduct was lawful.*

ADOPTED

THAT Article XVI, Section 4 b) Council on Dental Materials and Devices read:

The Council on Dental Materials and Devices shall consist of eight (8) persons who shall be appointed annually by the Board of Governors.

ADOPTED

THAT Group Status be removed from these By-laws, as there are no terms of reference for this category at the present time.

ADOPTED

THAT Article XVII, Section b be amended to reflect that CDA membership requirement in Specialty Sections be removed, and

THAT only active members of the CDA shall be eligible to serve as representatives to the CDA.

ADOPTED

BY-LAWS RESOLUTIONS ... continued

RESOLVED:

THAT Article XXII - Rules read:

Unless inconsistent with these by-laws, the Sturgis Standard Code of Parliamentary Procedure (Second Edition) will apply.

ADOPTED

THAT Article XXIV - Execution of Documents read:

Contracts, documents or instruments in writing requiring the signature of the Association and approved by the Executive Council or the Board of Governors, may be signed and sealed by the Executive Director, together with any one of the voting members of the Management Committee, and all contracts, documents and instruments as executed shall be binding upon the Association without any further authorization or formality. The Executive Council shall have the power from time to time by resolution to appoint any person or persons on behalf of the Association either to sign contracts, documents or instruments in writing generally or to sign specific contracts, documents or instruments in writing and if required to affix the corporate seal of the Association thereto.

ADOPTED

DENTAL MATERIALS & DEVICES

REPORT OF THE CDA COUNCIL ON DENTAL MATERIALS AND DEVICES TO THE 1983 INTERIM BOARD OF GOVERNORS MEETING

Members: Dr. R.Y. Barolet, Quebec City, Chairman
Dr. P.C. Desautels, Montreal, Que.
Dr. J.M. Gourley, Corner Brook, Nfld.
Dr. L.N. Johnson, London, Ont.
Dr. D.W. Jones, Halifax, N.S.
Dr. D.C. Smith, Toronto, Ont.
Dr. P.T. Williams, Winnipeg, Man.

Executive

Liaison: Dr. J. Robertson, Summerside, P.E.I.

1. Council Meeting

One meeting of the Council took place at the Ottawa headquarters on November 25th, 1982 since the last report to the 1982 Board of Governors meeting in Ottawa.

Business Requiring Board Action

2. CSA/CDA Certification Program

At the last meeting of the Council presentation was made by representatives from the Canadian Standards Association, Messrs. T. Walker and J. Wolfe, on the establishment of a dental materials certification program based on existing and future Canadian national standards. A proposal from Canadian Standards Association outlining the mechanism of such a program is appended to this report.

APPENDIX I

At the same time, Council members questioned the CSA representatives on the methods they were using to keep the costs of preparing standards to a minimum. They advised that they would do their utmost to keep costs to a minimum by reducing overheads, cutting back on travel, attendance at conventions, etc. Their internal mechanisms for standard justification have also been considerably simplified. CSA has indicated that it wishes to solicit funding from governmental agencies and requested that CDA support it in their endeavours by making joint approaches as much as possible. Assurance was given to CSA that this was indeed possible and would give the program and the submissions more credibility.

Informal discussions have also taken place with Health Protection Branch on the possibility of instituting a mandatory program of

2. CSA/CDA Certification Program - continued

certification for certain dental materials which had a direct impact on the health of Canadians. Very encouraging results were obtained from this agency but it was pointed out that a request for such a mandatory program must emanate from CDA and have the endorsement of the CSA. Based on these discussions, it was

RESOLVED:

83.10

WHEREAS the CDA has already approved the principle of a certification program on dental materials and devices;

THAT a voluntary certification program be developed with the Canadian Standards Association; and

FURTHER THAT the Federal Government be approached to investigate the feasibility of establishing a mandatory program with regard to certain selected dental materials and devices, (e.g. restorative dental materials, dental cements; and

FURTHER THAT the approved materials be permitted to bear a CDA mark certifying those materials which meet Canadian national standards.

Adopted

3. Health Protection Branch, National Health & Welfare

Council was made aware that additional staffing and facilities had been authorized at the Bureau of Medical Devices and at present there did not exist any dental person to look after the affairs of the dental profession.

RESOLVED:

83.11

WHEREAS the CDA and CSA are evolving dental standards and a testing program and

WHEREAS the Health Protection Branch is increasing its staffing and facilities

....continued

3. Health Protection Branch, National Health and Welfare - continued

THAT the Council on Dental Materials and Devices urges that the appointment of a dentist or dental scientist to the Medical Devices Bureau, Health Protection Branch, to supervise a program of evaluation and testing of dental materials and devices, be considered.

Executive Council agrees.

Items for Board Information

4. CDRF Award

At least four submissions have been received for the subject award and are in the process of being evaluated. A recommendation of the next recipient of the award will be forthcoming at the Vancouver Board meeting.

Council wishes to draw the attention to the Board of the considerable amount of work involved in organizing the CDRF Award process. Solicitations are sent to all the dental schools and individual approaches are made to all the graduate students in Canadian universities. When submissions are received, they are sent out to qualified referees across Canada for evaluation. These evaluations are then studied and a final winner is proposed. Council is most grateful to the Chairman of its CDRF Award Committee, Dr. Pierre Desautels, who has been looking after this activity for the last five years or so.

Council is concerned about dental research funding in Canada. The CDA has only paid lip service to this activity during the last few years and Council is considering various ways to encourage such research activities using the Canadian Dental Research Foundation as a possible vehicle. Some organizations such as Ontario Lotto have funds available for research in the health field but can only distribute these funds via recognized research foundations. The CFDE has been approached in the past to adopt a separate research mandate with very limited success. Council feels that if CFDE does not wish to pursue this field, then Council will consider it legitimate to approach various funding agencies and industry to solicit research funding.

5. Status Reports

Two status reports have been prepared and will be submitted for publication in the Journal. These are on Endodontics and the Use of Cyanoacrylates in Dentistry.

6. Toxic Element Research

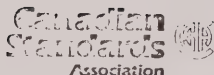
After the last Board meeting, Council received some documentation from a Board member on the potential hazards of dental amalgam. Council discussed this material and concluded that it required much further study before it could pronounce itself on this matter. Accordingly it is organizing a separate one day meeting next spring to deal with this subject. Interested experts will be invited to attend this meeting. Dr. Derek Jones of Dalhousie University has agreed to act as a Chairman for this special one day meeting. In the meantime, each member of Council is investigating this matter independently and will be expected to report at the subject meeting.

Respectfully submitted,

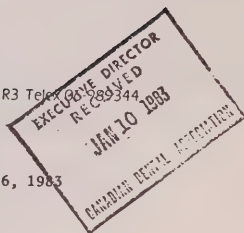
R.Y. Barolet,
Chairman,
Council on Dental Materials & Devices

ADOPTION OF REPORT

The Board of Governors accepts the Report of the Council on Dental Materials and Devices with thanks.



178 Rexdale Blvd., Rexdale (Toronto), Ontario, Canada M9W 1R3 Tele



January 6, 1983

Mr. H. E. Drouin,
Executive Director,
Canadian Dental Association,
1815 Alta Vista Dr.,
Ottawa, Ont
K1G 3Y6

Dear Mr. Drouin:

I enclose the "Proposal for a Certification Program on Dental Materials".
A few alterations have been made to the version I sent to you a few days
ago. These have been mainly for clarification and do not alter the intentions.

The letter of Understanding and the Service Agreement have been left blank, as
these will require considerable discussion.

Please call me or John Wolfe if you have any concerns over the Proposal.

Sincerely,


(Mrs.) Jean Guest, P. Eng.,
Health Care Technology Section,
Certification Division.

JG/ne

(416) 744-4374

cc: J. Wolfe

cc: J. Doyle

THE CERTIFICATION OF DENTAL MATERIALS

Proposal for a Program

to be administered by

The Canadian Standards Association (CSA)

on behalf of

The Canadian Dental Association (CDA)

January 6, 1983

INTRODUCTION

The CDA and the CSA have co-operated in the preparation of standards for Dental Materials, with the aim of providing the dental community with certified dental products.

This proposal outlines the establishment of a voluntary certification program, administered by CSA on behalf of CDA.

It is suggested that the CDA and CSA should contact the Federal Authorities (as discussed at the previous meeting of the CDA) for consideration of a planned approach to mandating certification of certain dental material standards.

Concurrently, CSA and CDA should make a proposal to the Bureau of Medical Devices for funding of the initial development of the certification program.

A possible time frame is presented.

CONTENTS

Standards proposed for inclusion in Certification Program

Details of Operation of Certification Program.

1. Testing Laboratories
2. Certification Notices
3. CDA Advisory Panel
4. Procedure
5. Marking
6. Audit Procedure
7. Charges to Manufacturer

Presentation to Federal Authorities.

1. Funding of Program
2. Mandatory Standards

Time Frame

CSA Procedures

Appendices:

- I Letter of Understanding between CDA and CSA.
- II Procedural letters between CSA and CDA Advisory Panel.
- III Tripartite Agreement between CDA, CSA and Certified manufacturer.
- IV Time Chart.
- V Estimated charges to submitters.

STANDARDS PROPOSED FOR INCLUSION IN CERTIFICATION PROGRAM

The following Standards are published, and are being proposed for inclusion in the voluntary Certification Program.

CAN-2349.3-M81	Dental Mercury
.4-M80	Dental Inlay Casting Wax
.5-M80	Dental Casting Gold Alloys
.6-M82	Alginate Dental Impression Material
.16-M82	Alloys for Dental Amalgam

Future Standards include "Dental Base Metal Casting Alloys" and Standards for Cements and Restorative Resins.

DETAILS OF OPERATION

1. Testing Laboratories

Two proposals have been considered for the introduction of a dental materials certification program. The first suggestion is for CSA to purchase the required capital equipment and proceed with testing in-house, as in the majority of CSA certification programs. The second and preferred proposal is for the testing to be performed by University Dental Departments on behalf of CSA.

In this regard five University Dental Departments have expressed interest in taking part in testing for a certification program for Dental Materials.

Dalhousie University, Halifax, Nova Scotia	-	Dr. D.W. Jones
University of British Columbia, Vancouver, British Columbia	-	Prof. R.H. Roydhouse
University of Manitoba, Winnipeg, Manitoba	-	Dr. P.T. Williams
University of Western Ontario, London, Ontario	-	Dr. Johnson
University of Toronto, Toronto, Ontario	-	Dr. Pilliar Dr. Smith

Discussions on the formal contract required between a University Department and CSA are underway. It is desirable to have at least two independent facilities available so that cross checking of results is possible. It is hoped eventually to have a number of universities involved in the program, which will be administered by CSA.

Under the CSA Certification Division Operating Procedures (ref 6.9.4), CSA is required to investigate all contract testing facilities. The costs will have to be recovered by a surcharge to submitters unless developmental funding is available.

The cost of performing certification testing and re-examination testing will be invoiced to CSA by the laboratory. CSA will recover these charges from the manufacturer by including them in the charge for certification or in the annual fee, as relevant.

Audit samples will be sent to test laboratories twice per year. Cost of the samples and of the analysis will be absorbed by the laboratory as part of the normal quality control procedures.

2. Certification Notice

On behalf of the CDA, the CSA will issue a Certification Notice to the Dental community, advising the interested parties of the existence of the Certification Program.

The Certification Notice will outline the procedures that manufacturers requesting certification are required to follow, and detail the requirements for certification.

A separate Notice will be issued for each new standard when it is included in the program.

CSA will also issue Certification Notices and Bulletins, detailing revisions to the standards and the procedures necessary for compliance for manufacturers of both Certified and uncertified products.

CSA will liaise with the CDA so that Press Releases and Notices in the Professional Journals may also be issued when applicable.

3. CDA Advisory Panel

Since CSA will be acting on behalf of CDA, a Letter of Understanding between CSA and CDA will be required to govern the operation of the Certification Program. The use of the CDA mark and the operation of an Advisory Panel will be included.

To protect the use of the CDA mark, the CDA will set up an Advisory Panel to which CSA will refer problems that are outside CSA's present sphere of expertise, e.g. safety for use in the mouth.

The Technical Committee of Dentistry is being asked to include criteria for evaluations of safety. Attention is being directed to:

"Recommended Standard Practices for Biological Evaluation of Dental Materials". Federation Dentaire International (FDI), Commission on Dental Materials, Instruments, Equipment and Therapeutics (COMIET).

When specific criteria have been included in the relevant standards, the need for discretionary judgements, and reference to the Advisory Panel, will be reduced.

Prior to approval being given to any product, CSA will send a copy of the final report and any additional relevant information to the CDA Advisory Panel. Written objections to approval shall be received by the Chairman within ten days. In the absence of any objections, the Chairman shall confirm in writing within a further ten days that the material complies with the relevant Standard and may carry the CDA Mark.

A Service Agreement between CDA, CSA and the submitter will be required to protect confidential information, and to detail the responsibilities of CDA, CSA and the submitter. The agreement will also define the rights and restrictions concerning the use of the CDA Mark.

4. Procedure

Manufacturers who apply to CSA for certification, will be advised of the estimated charges, and requested to send a deposit and samples of the product to CSA. These initial samples will not be obtained on the open market, for the following reasons:-

- i. New products may not be available.
- ii. Difficulty in identification.
- iii. Cost
- iv. CSA cannot exercise any control over unmarked and uncertified products.
- v. Manufacturers should be encouraged to seek certification before Marketing a new product.

CSA will examine the samples and send them to a contract test facility with a request detailing the specific tests to be performed. The results will be returned to CSA.

CSA will advise the manufacturer of the results of the examination and tests and will request alterations necessary for compliance with the relevant standard.

When the manufacturer has agreed to all the requirements for compliance, including any monitoring and compliance assurance procedures deemed necessary, CSA will send a copy of the final report to the members of the CDA Advisory Panel. When the Advisory Panel Chairman has approved the report, CSA will issue a letter of certification on behalf of CDA, giving permission to use CDA Mark.

The manufacturer will then be requested to sign the Service Agreement, and will be required to pay an annual fee. This will cover the cost of auditing and periodic retesting.

5. Marking

In addition to the Markings required by the standard, the manufacturer will be required to mark certified products with:

Manufacturer's identity

Date code (establish month and year)

CDA Mark (type of Mark to be established by CDA)

Reference to standard with which the product complies, and a disclaimer where relevant.

e.g. "This product is certified to the requirements of CAN3-Z349.5-M80, Dental Casting Gold Alloys. The CDA have not investigated other physiological effects".

CSA will examine each proposed certification standard and will list proposed cautions and disclaimers. These will be agreed with the CDA.

6. Audit Procedure

CSA inspectors will make periodic unannounced visits to the manufacturer, to ensure ongoing compliance. Samples for retesting will be obtained either on the open market, or from the manufacturer.

7. Charges

The charges to the manufacturer will be calculated on a time-cost basis, plus the test charge. A surcharge will be added to the latter, to cover CSA's costs in initial and continuing approval of the test facilities.

An annual fee will be charged, to cover the cost of auditing and ongoing retesting.

Estimates are presented in Appendix V. It should be noted that when an inexperienced manufacturer submits a non compliant product for certification, the additional work involved may result in increased charges before certification is granted.

When it is considered necessary, CSA will make a Pre-certification inspection of the manufacturer's facility, to ensure that he is able to continue to produce a product that complies with the requirements. The manufacturer will be charged with the travelling, living and time costs of the Engineer at the prevailing rates. CSA at all times attempts to reduce charges by using local branches, or by combining visits to different facilities.

PRESENTATION TO FEDERAL AUTHORITIES

1. Funding of Program

A joint presentation will be made by CDA and CSA to request funding to establish the certification Program. Items included will be test equipment, staff training, investigation of test facilities, set-up charges, initial meetings, etc.

2. Mandatory Standards

Consideration should be given by the CDA as to which Standards should be mandated. It has been suggested that only those Standards for materials for use in the mouth should be included in a mandatory program. A joint presentation would be made by CDA and CSA.

ESTABLISHMENT OF PROGRAM - PROBABLE TIME FRAME

(a) Test Laboratories

- agreement reached in principle
- expected to finalize in Jan/Feb 1983
- approval of facilities after March meeting of CDA Board.

- (b) Agreement with CDA
 - agreement reached in principle
 - details of letter of understanding between CDA and CSA to be established January/February 1983.
 - details of service agreement between CDA, CSA and submittor to be established Jan/Feb 1983.
 - Advisory panel to be established - After March meeting of CDA Board.
- (c) Presentation to CDA Board March 1983.
- (d) Joint CDA and CSA presentations to BMD and Health and Welfare - April 1983. Exploratory discussions to start immediately.
- (e) Presentation to Industry April 1983.
- (f) Certification Notice
 - to be issued when above details finalized.

CSA PROCEDURES

The CSA Certification Division has detailed operating procedures, to ensure fair consideration of submitted products, and of any disagreements that may arise. These procedures are constantly under review.

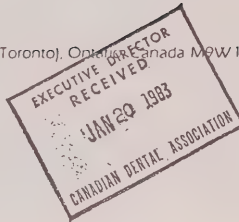
Certification cannot be granted to a product that does not comply with the relevant Standard. CSA hopes to set up at least two separate facilities for testing dental materials, so that independent results may be obtained when necessary. For example, a manufacturer may request that his product be retested - at his own cost - at an approved laboratory. The capability of contract test facilities will be investigated and maintained according to established CSA procedures.

Provision is made for the relevant Technical Committee to consider requests for interpretation of a Standard when the meaning and/or intent of a clause is unclear, or is disputed. Should a manufacturer consider that a revision to a Standard is required, he is advised as to the procedure whereby a presentation to the Technical Committee will be considered. CSA Standards are written on the consensus principle, and the Committees have a balanced membership matrix, with wide representation.



178 Rexdale Blvd., Rexdale (Toronto), Ontario Canada M9W 1R3 Telex 06-989344

Mr. H.E. Drouin,
Executive Director,
Canadian Dental Association,
1815 Alta Vista Dr.,
Ottawa, Ont.
K1G 3Y6



January 11, 1983

Dear Mr. Drouin:

Please find attached a draft copy of the letter of understanding between the Canadian Dental Association and the Canadian Standards Association re: The Dental Materials Certification Program.

The Service Agreement is still under consideration.

Please call me or Jean Guest if you have any concerns over the letter.

Yours truly,

A handwritten signature in cursive script, appearing to read "John Wolfe".

John Wolfe,
Manager,
Health Care Technology Section,
Certification Division.

(416)744-4378

JW/jl

Encl.



178 Rexdale Blvd., Rexdale [Toronto], Ontario, Canada M9W 1R3 Telex 06-989344

January 11, 1983

Mr. H.E. Drouin,
Executive Director,
Canadian Dental Association,
1815 Alta Vista Dr.,
Ottawa, Ont.
K1G 3Y6

Subject: Letter of Understanding for the Dental Materials Certification
Program Operated by CSA on Behalf of the Canadian Dental Association

Dear Mr. Drouin:

On your acceptance of the terms and conditions specified herein, this letter will constitute the Agreement between the Canadian Standards Association ("CSA") and the Canadian Dental Association ("CDA") for our proposed Dental Materials Certification Program.

- (1) CSA will establish and promote, with the co-operation of the Canadian Dental Association ("CDA"), a Certification Program for Dental Materials.
- (2) The standards being proposed for inclusion in the voluntary Certification Program are:

(Cont'd...2)

CC21/1/j1

Mr. H.E. Drouin

January 11, 1983

CAN-2349.3-M81	Dental Mercury
CAN-2349.4-M80	Dental Inlay Casting Wax
CAN-2349.5-M80	Dental Casting Gold Alloys
CAN-2349.6-M82	Alginate Dental Impression Material
CAN-2349.16-M82	Alloys for Dental Amalgam

Other standards in the Dental Field are being proposed for inclusion in the program at a future date.

(3) CSA will administer the Certification Program on behalf of the CDA.

(4) In reference to (3), CSA will

- : Contract with competent testing laboratory facilities as per CSA Certification Division operating procedures to perform the relevant certification testing and re-examination testing as prescribed in the appropriate CSA standard.
- : Issue on behalf of the CDA a Certification Notice to the Dental Community, advising the interested parties of the existence of the Certification Program.
- : Issue any subsequent Certification Notices and Bulletins detailing revisions to the standards and the procedures necessary for compliance for submitters.

(Cont'd.....3)

CC21/2/nc

Mr. H.E. Drouin

January 11, 1983

- : Collect all fees for services rendered by CSA from submitters. The Testing Laboratory(s) will be reimbursed for services by CSA under terms mutually agreeable to CSA and the Testing Laboratory.
- : Provide members of the CDA Advisory Panel with a copy of the final report after the submitter has agreed to all the requirements for compliance, including any monitoring and compliance assurance procedures deemed necessary.
- : Issue a letter of certification on behalf of the CDA giving permission to the submitter to use the CDA Mark after the Advisory Panel Chairman has approved the report.
- : Request the submitter to sign a Service Agreement detailing the responsibilities and privileges of CDA, CSA and the submitter.

It is understood that the CDA will:

- (1) Co-operate actively in the establishment and promotion of a Certification Program for Dental Materials.

(Cont'd.....4)

Mr. H.E. Drouin

January 11, 1983

- (2) Liaise with the CSA so that Press Releases and Notices in the Professional Journals may also be issued when desirable.
- (3) Grant CSA the right to grant the submittor a non-exclusive licence to use the CDA Mark on the Material manufactured by or for the submittor in accordance with the Service Agreement.
- (4) Establish a CDA Advisory Panel to which CSA will refer problems that are outside CSA's present sphere of expertise and to give final approval on product submitted for certification.
- (5) In reference to (3), the CDA Advisory Panel Chairman shall advise CSA of its decision within 20 working days of receipt of the final report.
- (6) Sign the Service Agreement detailing the responsibilities and privileges of CDA, CSA and the submittor.
- (7) Agree not to disclose information which is obtained by CSA in confidence from the submittor or the manufacturer of the component, material, product, etc, provided that such information is not already known to the CDA, already available to the public or subsequently acquired from other sources.

(Cont'd.....5)

CC21/4/nc

Mr. H.E. Drouin

January 11, 1983

Agreement may be terminated by either party, at the end of a negotiated period after notification, however, such period shall not be less than six months. Such negotiations will take into account any commitments undertaken by the CSA or CDA in terms of personnel and equipment.

Should you have any questions regarding the above, please feel free to contact me at (416)744-4378.

Yours truly,

John Wolfe,
Manager,
Health Care Technology Program,
Certification Division.

Canadian Dental Association
Understood and Agreed

By: _____

Date: _____

Witness: _____

JW/nc

CC21/5/nc

Appendix I

Letter of understanding between CSA and CDA under discussion.

178 Rexdale Blvd., Rexdale (Toronto), Ontario, Canada M9W 1R3 Telex 06-989344

File:

Submittor:

Material:

Date:

To: Members of the Canadian Dental Association Advisory Panel

Dear Members:

Please examine the report and enclosed information and advise the Chairman on the attached form, if the dental material complies with the requirements and is acceptable to bear the CDA Mark.

Yours sincerely,

Sent to:

To:

Chairman,
CDA Advisory Panel,
Dental Materials Certification Program.

Copy:

Certification Division
Canadian Standards Association
178 Rexdale Blvd.
Rexdale, Ont.
M9W 1R3

Subject:

Submittor:

File:
Material:
Date:
Standard:

(Please mark an X in the appropriate space).

1. I consider the report on the subject material to be satisfactory and recommend that certification and permission to bear the CDA Mark be granted.
2. I need further information before reaching a decision.
3. The report is unsatisfactory, and certification should not be granted.

Comments:

Signed:

Date:

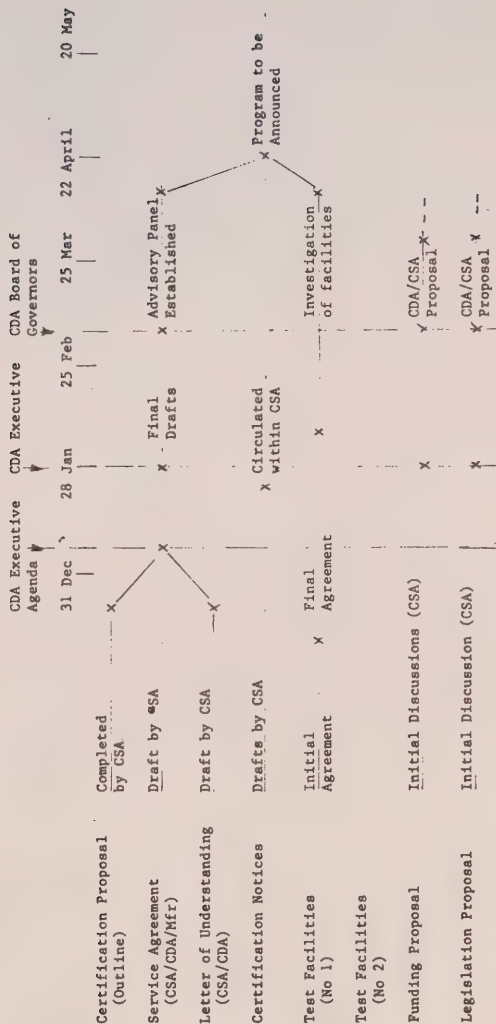
Appendix III

Tripartite Agreement between CDA, CSA and Certified Manufacturer.

Under consideration by CSA's Legal Department.

Suggested Time Frame

Appendix IV



Estimated Charges to Submitters

Dental Mercury - Z349.3

Initial Certification\$1,500 to \$2,500
Annual Fee.....\$ 800 to \$1,200

Dental Inlay Casting Wax - Z349.4

Initial Certification.....\$3,000 to \$5,000
Annual Fee.....\$1,000 to \$1,500

Dental Casting Gold Alloys - Z349.5

Initial Certification.....\$3,000 to \$5,000
Annual Fee.....\$1,000 to \$1,500

Alginate Dental Impression Material - Z349.6

Initial Certification.....\$3,000 to \$5,000
Annual Fee.....\$1,000 to \$1,500

Alloys for Dental Amalgam - Z349.16

Initial Certification.....\$2,500 to \$3,500
Annual Fee.....\$ 800 to \$1,200

HEALTH CARE

REPORT OF THE COUNCIL ON HEALTH CARE TO THE 1983 INTERIM BOARD OF GOVERNORS MEETING

- Members: Dr. H. Horsman, Riverview, N.B., Chairman
Dr. R. Bartalos, Ancaster, Ontario.
Dr. A.D. Crocker, Tignish, P.E.I.
Dr. E. Fukushima, Vancouver, B.C.
Dr. Keith Hamilton, Saskatoon, Sask.
Dr. R. Janes, Gander, Newfoundland
Dr. D. MacLeod, Kentville, N.S.
Dr. C.T. McNichol, Calgary, Alberta
Lt. Col. P.R. McQueen, CFDS, Ottawa, Ontario
Dr. J.C. Rooney, Riverview, N.B.
Dr. K.R. Skinner, Winnipeg, Man.
Dr. A. Toeman, Verdun, Quebec
- Dr. W.R. Bedford, Senior Consultant, Dentistry,
Health & Welfare
Ms. K. MacDonald, CDHA, Halifax, N.S.
Ms. Suzanne Mader, President, CDAA, Halifax, N.S.
- Executive
Liaison: Dr. P.R. Crawford, Winnipeg, Man.

1. Council Meeting

Since the last Annual Board of Governors Meeting in September 1982 the Council on Health Care has met once on November 4-5, 1982.

Matters Requiring Board Action

2. Guidelines for the Control of Radiation in the Dental Office

These guidelines were presented to the CDA Board of Governors September 1982. After much discussion the Board made the Motion to Refer 82:83, "That the document 'Guidelines on the Control of Radiation in the Dental Office' be returned to the Council on Health Care for further study".

The various concerns expressed by Board Members were taken under consideration by Council and the changes and elaborations are incorporated in the new draft included as Appendix I.

APPENDIX I

2. Guidelines for the Control of Radiation in the Dental Office -
(continued)

Special attention was given to Item 4 of sub-heading "Guidelines to Protect the Patient", in regards to who actually owns the radiographs. Legal opinions were sought and the general consensus is that the dentist owns the radiograph, the patient is paying for the dentist interpretation of the films.

In order to ensure that these Guidelines remain current, a motion was made by Council that "the Chairman of the Subcommittee on Radiation review yearly this document".

Council recommends:

THAT the Guidelines on Control of Radiation in the Dental Office be adopted as appended.

MOTION TO REFER:

83.12 *THAT the Guidelines on Control of Radiation in the Dental Office be referred back to the Council on Health Care for further consideration.*

ADOPTED

3. Uniform System of Codes and List of Services

After lengthy discussions the following new in-office laboratory procedures identification numbers were introduced.

These numbers are introduced to the Uniform System of Codes and List of Services to satisfy the increasing demand by dentists to identify "in-office" laboratory procedures. Many dentists have had difficulty with third party carriers because no procedure number was available for those laboratory procedures carried out in the dental office.

The "in-office" numbers are identified according to the disciplines of dentistry and it will be the responsibility of each dentist who uses these numbers to identify the laboratory procedures. It is conceivable that the same number may be used more than once where two or more lab procedures are completed under the same discipline.

3. Uniform System of Codes and List of Services - continued

Council recommends:

THAT the following procedure numbers be accepted for "in-office" laboratory procedures:

08000 Diagnostic Lab Procedures
 15800 Preventive Lab Procedures
 27280 Restorative - Lab Procedures, Porcelain
 27380 Restorative - Lab Procedures, Gold
 39800 Endodontic Lab Procedures
 43800 Periodontic Lab Procedures
 55800 Removeable Prosthodontic Lab Procedures
 66800 Fixed Prosthodontics Lab Procedures
 79800 Surgical Lab Procedures
 80800 Orthodontic Lab Procedures

MOTION TO REFER:

83.13

THAT procedure codes for "in-office" laboratory procedures be referred back to the Council on Health Care for the development of a single code number to cover these procedures.

ADOPTED

Matters for Information Not Requiring Board Action

4. Orthodontic Insurance Form

The Canadian Association of Orthodontists has completed its objective of gaining approval from all provinces in Canada for a national Orthodontic insurance form and guidelines. The Council perused and accepted the Orthodontic Insurance Form as submitted.

5. Subcommittee for the Study of Fee for Service Practice

The Subcommittee formed to Develop a Methodology for a Statistical Document Comparing Fee for Services vs Other Systems has been directed by Council to research the use of a survey methodology to complete this project and will report to Council at its next meeting.

Matters for Information not Requiring Board Action - continued

6. Committee on Fluoridation

Council continues to look into methods to increase public acceptance of fluoride and increase utilization in the 1-3 year of the child's life.

7. Occupational Health Hazards

Lt. Col. McQueen accepted the position as Chairman of the Subcommittee on Occupational Health Hazards. He will be doing a general review of the literature on the topic for possible position papers and/or guideline development.

8. Prepaid Dental Plans

Council has ongoing liaison with the carriers of prepaid dental plans. Council is also in the process of updating CDA Policies on Prepaid Dental Plans and Guide on How to Complete Dental Claim Forms that was first produced in 1979.

9. Uniform System of Codes and List of Services

The request for additional numbers to cover the category of examination of edentulous mouth as brought to the 1982 Annual Meeting was resolved as follows:

Whereas British Columbia has expressed its desire to use existing code numbers, the request for the addition of the numbers 01415 and 01416 to the Uniform System of Codes and List of Services be retracted.

Respectfully submitted,

H.W. Horsman,

Chairman,
Council on Health Care.

ADOPTION OF REPORT

The Board accepts the Report of the Council on Health Care with thanks.

GUIDELINES FOR THE CONTROL OF RADIATION IN THE DENTAL OFFICE

INTRODUCTION:

Since the Federal Government maintains jurisdiction over the standards of construction and functioning of x-ray equipment, while its installation, registration and office design criteria for its use are promulgated by provincial legislatures, any guidelines developed by C.D.A. for the use of x-radiation in the dental office should not deal specifically with legislative areas but rather set forth standards of practice for dentists which reflect and demand professional competence and judgement.

General Guidelines

1. All x-ray equipment should conform to the Federal requirements of the Radiation Emitting Devices Act.
2. All equipment installation and room design criteria, e.g. with respect to wall insulation, (lead lining or equivalent) should be in conformance with Provincial regulations. In the absence of existing Provincial regulations in any particular jurisdiction, the dentist should refer to Health & Welfare Canada Safety Code 22, National Council on Radiation Protection & Measurements, Report 35, or the ADA Recommendations on Radiographic Practices, 1981.
3. All operators should possess an adequate knowledge of radiation physics, radiation hazards and be able to produce consistent radiographs of diagnostic quality with a minimum of overall radiation exposure.
4. It is highly desirable that the operator set up a regular inspection programme of x-ray equipment (usually three years). On a constant basis, it is highly desirable that the operator establish a program to ensure consistently high quality radiographic film by monitoring processing conditions.
5. It is highly desirable that the operator request a qualified physicist to perform a regular inspection of the x-ray equipment to assess radiation output and "normalize" the x-ray taking system; that is, ensure that existing exposure and processing conditions are producing radiographs within an acceptable exposure range.
6. An exposure guideline chart should be fixed near the x-ray timer indicating kV, mA and the exposure time to be used for children, adults and edentulous patients.

7. View exposed radiographic film under optimal conditions. A variable intensity viewer is desirable. Extraneous light should be minimized.
8. It is highly desirable that dentists enroll in continuing education in the many aspects of diagnostic radiology, diagnostic technology and radioprotection.

PROTECTION TO OPERATORS:

1. All operators must be of 18 years of age or older.
2. All operators should be licensed or certified according to a standard recognized by the provincial dental licensing body.
3. Any female operator who suspects she is pregnant should immediately advise the dentist so that he can ensure that for the duration of her pregnancy she will experience minimum radiation exposure. It should be noted here that the developing foetus is particularly sensitive to x-ray damage.

Operators in training

1. Personnel here must work under the supervision of a licensed dentist.
2. The minimum age of operators in training should be ideally 16 years of age but notwithstanding the guideline, any student under the age of 16 years shall not receive a dose to the gonads and/or bone marrow in excess of 500 millirems in any one year.
3. Personnel must not be exposed to the primary beam. Deliberate exposure of an individual for training purposes must not be carried out.

GENERAL GUIDELINES FOR OFFICE PERSONNEL:

1. A room must not be used for more than one x-ray procedure simultaneously.
2. No person, whose presence is not essential must be in the room during an exposure.
3. If the operator must be in the room with the patient during exposure, then protective clothing must be worn.
4. The dental film should be fixed in position using holding device where necessary.

5. If parents or escorts are called to assist, then protective clothing should be worn.
6. The x-ray housing must not be held by the hand during operation.
7. All office personnel working with x-ray equipment should wear personnel dosimeters.
8. Dosimeters should be worn under the protective lead apron if the operator is in the room with the patient during exposure.
9. In situations where excessive radiation doses (greater than 25% of maximum permissible) are received by any one person, then remedial steps must be taken to improve techniques and protective measures.

GUIDELINES TO PROTECT THE PATIENT:

The risk to the individual patient from a single dental x-ray is very low. However, the risk to a population is increased by increasing the frequency of x-ray examinations and by increasing the number of persons x-rayed. Every effort should be made to ensure that patients are not subjected to unnecessary radiation.

1. The prescription of an x-ray examination by a licensed dentist should only be based on a clinical evaluation and be for the purpose of obtaining information not readily available from other sources.
2. The justification for taking dental radiographs should be determined by a perceived need to obtain specific information which could contribute to a correct diagnosis or prevention rather than utilizing the concept of the routine periodic examination with or without having seen the patient beforehand.
3. One should determine if any recent x-ray films are available and see if those are adequate.
4. When a patient is transferred from one dentist to another and diagnostic information is sought which might have been available on previous radiographs, then the referred dentist should attempt to obtain such radiographs rather than routinely order a new prescription of radiographs.
5. The number of radiographs required should be kept to a minimum, consistent with obtaining the required information.

6. Only films of an American National Standards Institute - Speed Group D rating or faster, should be used.
7. The quality of radiographs should be monitored routinely to ensure that they satisfy diagnostic requirements.
8. Repeat films should not be taken if the radiograph is not of the "best" quality but sufficient diagnostic information is contained within.
9. A lead apron and thyroid collar should be used for the taking of intra-oral films.
10. The x-ray beam should be well-collimated so that it irradiates only the minimum area necessary for the examination. Under no circumstances should it be in excess of 7 cm. (2-3/4") at the level of the skin.

X-Rays and the Pregnant Patient

1. Elective procedures should be deferred until after pregnancy.
2. If the films are necessary then they should be taken, provided that all the above safeguards are applied, using holding devices, paralleling techniques and leaded open-ended cone.

CONCLUSION:

There is really no "safe" level of radiation exposure. The frequency of the making of x-ray films is a matter of clinical judgement. The selection of equipment and techniques used is the decision of the dentist. However, the ultimate aim is to reduce the level of x-radiation emanating from the dental office and to this end there has evolved and been accepted a principle stating that an x-ray dose that can be reduced without loss of critical diagnostic information and without too much expense or inconvenience, should be reduced no matter how low it is and that a dose that can be avoided altogether without grave consequences, should be avoided. That is the ALARA Principle. (As Low As Reasonably Achievable).

COUNCIL ON HOSPITAL SERVICES

REPORT OF THE CDA COUNCIL ON HOSPITAL SERVICES TO THE 1983 INTERIM CDA BOARD OF GOVERNORS

Council Members: Dr. M. Gornitsky, Chairman, Montreal
Dr. E. Cree, Montreal
Dr. K. Gordon, Edmonton
Dr. J.H. Gryfe, Toronto
Dr. W.H. Susse1, Chilliwack
Dr. G.L. Terriss, Halifax
Exec. Liaison: Dr. D.L. Thompson, Calgary

1. COUNCIL MEETINGS

One meeting of the Council on Hospital Services has been held since the 1982 Annual Meeting of the Board of Governors, on January 21 - 22, 1983. All members of Council, with the exception of Dr. E. Cree, were in attendance. The Executive Liaison Representative and the Director of Accreditation were also present.

2. ITEMS OF BUSINESS FOR INFORMATION

(1) One Day Workshop

Council has proposed a One Day Workshop on Hospital Surveys. There is a lack of qualified surveyors to cover the number of hospital programs for which surveys are requested. Corporate Members would be invited to send representatives from their Hospital Services Committees.

(2) Survey Documents

The revised document for the survey of General Practice Residency/ Internship Programs was re-submitted to Chiefs of Dentistry and Deans of Dental Schools for their comments. These comments were reviewed by Council and the finalized document will now be put into use.

(3) The Canadian Standards Association has invited CDA membership on its Technical Committee on Sterilization. Council has recommended Dr. Walter Susse1 for this appointment.

COUNCIL ON HOSPITAL SERVICES

2.

- (4) Council reviewed Provincial Hospital Acts as they pertain to the practice of dentistry in hospitals and the status of dentists in such institutions.

(5) Surveys

Council approved the following Dental Services and/or Internship Programs:

Sunnybrook Medical Centre Toronto	Dental Service - Approval Internship - Provisional Approval
Mount Sinai Hospital Toronto	Dental Service - Approval Internship - Approval
Baycrest Geriatric Centre Toronto	Dental Service - Approval
Winnipeg Health Sciences Centre, Winnipeg	Dental Service - Approval Internship - Provisional Approval
Izaak Walton Killam Hosp. Halifax	Dental Service - Approval
Victoria General Hospital, Halifax	Dental Service - Approval - This Approval is restricted to Maxillofacial Surgery)
Notre Dame Hospital Montreal	Dental Service - Provisional Approval Residency - Provisional Approval

There are 12 surveys scheduled to be carried out during 1983.

Respectfully submitted by:

M. Gornitsky, Chairman,
Council on Hospital Services

ADOPTION OF REPORT

The Board of Governors accepts the Report of the Council on Hospital Services with appreciation.

COUNCIL ON INFORMATION SERVICES

REPORT OF THE CDA COUNCIL ON INFORMATION SERVICES TO THE 1983 INTERIM BOARD OF GOVERNORS

Members: Dr. Y. Kamachi, Ontario, Chairman
Dr. M. Carvonis, Quebec
Dr. W.T. Koltek, Manitoba
Dr. C.S. LeBlanc, New Brunswick
Dr. D. Scramstad, British Columbia

Dr. J. Laporte, Executive Liaison

1. Council Meetings

Since the 1982 Board of Governors meeting, the Council has met once, that being November 26, 1982.

Matters Requiring Board Action

2. National Dental Health Month

Dr. Carvonis reported on a National Dental Health Month Workshop held September 10, 1982, where it was recommended that CDA engage the services of a public relations firm to develop recommendations for a national campaign. The firm was engaged, but their first report to CDA was judged inadequate. A second workshop will be held when detailed recommendations are received from the present PR firm or another.

At the September NDHM workshop, it was revealed that since all provinces do not have equal NDHM budgets, some provinces promote NDHM using their own materials and some use all CDA materials.

After some discussion by Council members on this duplication of effort, it was suggested that NDHM be considered a major vehicle to promote dental health and dentistry. It was suggested that CDA create a strong program to promote NDHM and take a leadership role.

RESOLVED:

83.14

In light of the following

- 1) A recent study indicated approximately 40 per cent of the population does not seek regular dental treatment;*
- 2) The incidence of dental disease in those seeking dental treatment has decreased;*
- 3) The patient/dentist ratio has significantly decreased;*

continued....

COUNCIL ON INFORMATION SERVICES

2.

NDHM - continued...

That CDA play a strong leadership role to inform and educate the public regarding dental disease, prevention and treatment through the development of a national campaign to create dental awareness.

Adopted

RESOLVED:

83.16 *NDHM activities be reviewed and oriented in taking a leadership role in informing and in launching a communications program.*

Adopted

Matters of Information not Requiring Board Action

3. National Dental Health Month

Council was informed of the decision of the provincial chairmen to use the 1982 promotional material for NDHM 1983. The theme "April is National Dental Health Month" and "Avril est le Mois national de la santé dentaire- Sourions à pleines dents" has been added to the English and French poster and decal. At present, 485 English kits have been shipped to the provinces and 290 French kits have been shipped. The 1983 NDHM planning kit contains 14 new newspaper articles, a new section called "Facts for Spokespersons", and current news clippings highlighting the 1982 campaign. All other sections have been updated. Decals and posters have been distributed.

Dr. Carvonis resigned from the Council and as National Dental Health Month chairman at the last Council meeting. He has left the country.

4. Media Workshop

The media workshop held in Manitoba was very successful. A media workshop was held in Moncton, New Brunswick on January 22-23, 1983. This workshop had participants from New Brunswick, Prince Edward Island and Nova Scotia. The possibility of a second workshop for the Atlantic provinces is under investigation.

The media workshop is not available in the French language.

Matters of Information - continued

5. Pamphlets

(a) In Production:

Council approved the artwork for two prosthodontic pamphlets: "Do You Need Complete Dentures?" and "Are You Missing A Few Teeth?". These are not going into final production.

(b) Paedodontic Pamphlet:

Dr. Ian Bennett and Dr. Peter Pronych, both of Dalhousie University have agreed to collaborate on a paedodontic pamphlet. The "New Mother Package" produced in Alberta has been sent to Dr. Pronych to aid in the production of the pamphlet.

(c) Restorative Pamphlet:

At the request of Dr. E. Ambrose, of the University of Saskatchewan, who has agreed to write a pamphlet on restorative dentistry, Council discussed specific guidelines for the pamphlet. These were sent to Dr. Ambrose by letter.

(d) TMJ Pamphlet:

Council did not approve the latest draft of the TMJ pamphlet. It was decided that Council approach several experts on the subject for input into a general pamphlet. Council agreed that causes and symptoms of TMJ be discussed in the pamphlet but only brief general references to treatment be included.

(e) Pamphlet Duplication:

Corporate Members were asked to indicate if any pamphlets were published in the provinces. Of those responding, only Ontario indicated that pamphlets were published. Ontario publishes one on dentistry as a career and at one time published one on mouthguards. This has since been discontinued.

(f) Dental Hygienists Pamphlet:

The Dental Hygienists indicated that they would be interested in producing a pamphlet with CDA. Following discussion with the Hygienists, Council was informed that the subject was still under discussion by the Canadian Dental Hygienists Association executive.

6. Articles for Other Than CDA Journal

Following the recommendations of a previous Council meeting, an article was prepared on care of baby teeth and teething for the magazine

Matters for Information - continued

Articles for Other Than CDA Journal

"Best Wishes". This article, under the signature of Dr. C.S. LeBlanc has been submitted to "Best Wishes" for publication.

The magazine "Baby Talk" was also approached on a similar article, but does not require material until December 1983.

7. Dental Hygienists Booklet

Council reviewed a 40-page booklet in French written by a dental hygienist seeking funds from CDA to publish the booklet. Council members thought the book was well done but decided to inform the author that CDA does not provide funds for booklets of this nature and has its own pamphlet program.

8. Increasing Dental Awareness

Council discussed at length concerns brought to Council by Dr. J. Laporte which were expressed by the QDSA. Following discussion centering on the direction of dentistry in the future and the need to investigate future trends, and also on the need to disseminate more information on dentistry, the following motions were presented:

"That this Council compile information pertaining to motivating the public to seek more dental treatment and dental disease prevention, select and publish the information, and make it available to all corporate bodies, or any dental organization that would request such material; and

That the Council investigate the sources of projections of the future of dentistry, such as R.K. House and make recommendations on the feasibility of engaging such a service so that the CDA can advise dentists as to the trends and needs to help dentistry survive and flourish".

9. Video Cassettes

Council investigated the feasibility of purchasing the ADA video cassettes "Its Dental Flossophy, Charlie Brown" and "Toothbrushing With Charlie Brown". The latter sells for \$60 while the former sells for \$65. On August 1, 1983 the prices will be increased by \$5. Council decided that an ad be placed in the CDA Journal advising of the availability and cost of the Charlie Brown video cassettes. If response is sufficient they will be ordered.

Matters for Information - continued

10. Speakers Bureau

Council discussed the responses from Corporate members to a memo on the usefulness of a Speakers Bureau.

There was a generally positive response from the Corporate members on the usefulness of such a Bureau. More specific information on the Speakers Bureau was provided to one Corporate member by letter.

Respectfully submitted

Y. Kamachi,

Chairman,
Council on Information Services

ADOPTION OF REPORT

The Board of Governors accepts the Report of the Council on Information Services with appreciation.

STUDENT AFFAIRS

REPORT OF THE COUNCIL ON STUDENT AFFAIRS

TO THE

MARCH 1983 CDA BOARD OF GOVERNORS

Council members: Mr. Alain Thivierge, Chairman - Université de Montréal
Mr. Robert Scott, University of British Columbia
Mr. Rick Chilibeck, University of Alberta
Mr. Tim Barker, University of Saskatchewan
Mr. Dave McLeod, University of Saskatchewan,
(Student Governor)
Mr. Peter Kowal, University of Manitoba
Mr. Ed Busvek, University of Toronto
Miss Jane Metler, University of Western Ontario
Mr. Andrew Hasegawa, McGill University
Mr. André Ruest, Université de Montréal
Mlle Julie Boudreau, Université Laval
Mr. Don Trider, Dalhousie University
Dr. Rita Hurley, Montreal, Quebec (Past Student Governor)
Dr. Peter Judd, Toronto, Ontario (Past Chairman)

Executive Council Liaison: Dr. Bradley W. Holmes

1. Council Meetings

The Council has met once since the last Board meeting, on October 9, 1982.

A. Matters Requiring Board Action

1. Backpayment of Membership Fees

Council spent considerable time discussing the possibility of allowing students to pay their back membership dues in order to qualify for the graduate package.

It was Council's feeling that students should not be allowed to pay back dues without the authorization of the CDA Executive Council

RESOLVED:

83.16 *THAT there be no retroactivity of
CDA student membership fees unless
otherwise authorized by the CDA
Executive Council.*

Adopted

B. Information Not Requiring Board Action

1. Student Elections

The following two students were elected by Council to serve a three-year term:

Mr. Ed Busvek (University of Toronto) - Student Governor-Elect

Mr. Tim Barker (University of Saskatchewan) - Council Chairman-Elect

2. CDSPI Requested to Investigate an Instrument Insurance Package

Council felt that dental students could benefit from insurance coverage for their dental instruments. Consequently, CDSPI has been requested to investigate the feasibility of such a package.

3. Special Funding for Undergraduates

Council has requested that the Canadian Fund for Dental Education investigate the feasibility of a special emergency student loan service for students who have exhausted all other sources of financial aid.

Council hopes to receive a reply from CFDE in the very near future.

4. Council Guidelines

Council felt it was important to formalize a set of guidelines for Council on specific procedural issues. It was suggested that a set of draft guidelines be developed such as voting during Council elections, the selection of reps to outside meetings, etc., for advance distribution and full review at Council's next meeting.

5. Contributions to CFDE from Dental Students

Council felt that it was important that CSA members encourage contributions to the CFDE from their respective dental student societies, either through a direct contribution or through a monetary surplus after a planned social event.

B. Information Not Requiring Board Action (Cont'd.)

6. Completion Date for the Practice Administration Manual

Council felt that it was very important for the Practice Administration Manual to be presented to the Board for information. This is scheduled for completion by September 1983.

7. Student Journal Articles

Council discussed encouraging student input into the CDA Journal via a competition and prizes for the best student article(s).

Council recognizes that the concept of a student issue or a special section in the CDA Journal is dependent upon the decision of the Editorial Board.

It was felt that, if such a section or issue was feasible, the CFDE be approached for the donation of prizes.

8. Bulk Distribution of CDA Summer Journals

It was noted that many CDA Journals forwarded to the schools during the summer months, are lost or misplaced. Consequently, it was felt that summer Journals could be held by CDA and forwarded, in bulk, to the schools at the time of the annual membership campaign.

9. CDSC.83

Council recommended that the 1983 Canadian Dental Students' Conference be held in Vancouver, B.C. immediately after CDA's 1983 Vancouver Convention. Council is working to finalize this arrangement.

10. CDA Student Representative Manual

Council felt that the CDA Student Representative Manual should be updated to incorporate additional responsibilities for those student representatives in CDA's voluntary provinces. Suggested duties include working with the CDA Membership Committee for two years after graduation in the recruitment of CDA members among their fellow classmates.

Summary

The Council on Student Affairs continually strives to represent the interests and concerns of its membership - Canadian dental students. We sincerely feel that our activities are reflective of dental student concerns at the national level. In turn, we attempt to communicate our actions and decisions to the membership in a number of ways - i.e., through direct contact, our student newsletter and a formal reporting system.

Council appreciates the privilege of being involved in organized dentistry at the national level and extends its appreciation to the Board of Governors of the Canadian Dental Association for its continuing interest and concern in student affairs.

Respectfully submitted,

Alain Thivierge,
Chairman.

ADOPTION OF REPORT

The Board of Governors accepts the Report of the Council on Student Affairs with thanks.

INTERIM REPORT
OF
THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY
L'ASSOCIATION DES FACULTES DENTAIRES DU CANADA
TO THE
BOARD OF GOVERNORS
OF THE
CANADIAN DENTAL ASSOCIATION

We welcome this opportunity to report to the Board of Governors on some of the more important actions of the Association of Canadian Faculties of Dentistry/L'Association des facultes dentaires du Canada:

A. FUTURE DIRECTIONS

Long periods of in-depth investigation of future directions of ACFD/AFDC were undertaken. A broad list of activities in which the Association might be, or should be involved was developed. The areas of interest were categorized into one or more of three major groupings: Political, Association Role and Grass Roots. The Executive has taken action on the development of a position with respect to the energetic pursuit of those endeavours which it identifies as urgent and important to the future activities of ACFD/AFDC. Implicit in the implementation of these proposals will be a much wider utilization of the staff of member institutions through local ACFD/AFDC Committees.

B. RESEARCH FUNDING

An ad hoc group that was appointed to recommend ways and means to improve the critical shortage of dental research funding, met on December 3, 1982, with the Executive Council of ACFD/AFDC. This meeting was chaired by Dr. A. R. Ten Cate.

B. RESEARCH FUNDING - continued

The group recognized the need for:

- (1) education about the need for research, to the profession, the schools, the funding agencies, other health professionals and the politicians,
- (2) a national strategy for dental research,
- (3) recognition of the crisis in dental research funding and manpower,
- (4) the need for a unified voice to express these concerns.

The Executive Council subsequently established an ad hoc working group on Dental Research Strategies with the membership of: 10 Deans, CDA (President), National Health and Welfare, Canadian Association of Dental Research (CADR) (President), National Health Research Development Program, and the Medical Research Council and the Chairmen of the Research and Education Committees of ACFD/AFDC.

Funding for this group has been obtained from National Health and Welfare. Planning for positive action will commence early in 1983.

C. NATIONAL HEALTH STRATEGIES

The recently published report of the ad hoc committee on National Health Strategies was reviewed. It was noted with concern that it contained no reference to dental or oral diseases. The Executive Director conveyed the concern of ACFD/AFDC to the Canadian Dental Association.

D. OCCUPATIONAL HEALTH HAZARDS

The Education Committee will undertake a survey of all Canadian dental faculties to ascertain what is taught respecting occupational health hazards, and will develop guidelines for curriculum committees and the CDA Council on Education. This material will be available to the Council on Education of the Canadian Dental Association.

E. SALARIED DENTISTS

Dean A. Schwartz has agreed to serve on the newly formed committee of Salaried Dentists of the Canadian Dental Association.

F. WORKSHOP CONFERENCE ON RESEARCH AND TEACHING IN GERIATRIC DENTISTRY

The Conference on Geriatric Dentistry was held in London, Ontario on February 28 - March 2, 1983. There had been an increased number of persons wishing to attend. The Executive approved the attendance groups as below:

Invited Attendance:

Provincial Dental Health Directors

Provincial Registrars

Two Delegates from each dental school

N.H.R.D.P.

National Health and Welfare

M.R.C.

C.D.A.

CDHA

Section on Dental Hygiene

One member from each Dental Hygiene Program in Council

National Advisory Council on Ageing

American Academy of General Dentistry

President or designate - ACFD/AFDC

G. XIII BIENNIAL CONFERENCE ON CANADIAN DENTAL RESEARCH AND EDUCATION

The XIII Biennial Conference on Canadian Dental Research and Education will take place in Manitoba in June, 1984. The site, dates (June 10-16, 1984), schedule and themes will be recommended to the House of Delegates in March, 1983.

H. 1983 ANNUAL MEETINGS

The 1983 annual meetings of ACFD/AFDC will take place in Cincinnati, Ohio. The dates of the meetings are as follows:

March 14, 1983	-	Education Committee
		Research Committee
March 15, 1983	-	Executive Council
March 16, 1983	-	House of Delegates

Respectfully submitted,

Gordon W. Thompson, President
ACFD/ADFC

ADOPTION OF REPORT

The Board of Governors receives the Report of the Association of Canadian Faculties of Dentistry with appreciation.

CANADIAN FUND FOR DENTAL EDUCATION

INTERIM REPORT TO THE CANADIAN DENTAL ASSOCIATION BOARD OF GOVERNORS

MARCH 1983

1. I was delighted to learn from my predecessor Dr. James A. Guest that this body approved my appointment as Chairman of CFDE's Board of Trustees. I am honoured indeed to serve in this capacity and fully aware that I have been preceded by some exceptionally gifted and dedicated people.
2. As you know, I have been a Fund Trustee for the past three years and I want to assure you that the CDA Board of Governors and, in fact, everyone interested in providing good dental health services, is deeply indebted to Dr. James A. Guest for his effective leadership.
3. I am the first CDA Past President holding this office and have always been greatly impressed with the Fund's fine record of service to the profession. I will do my utmost to see that this record is continued.

1982 RESULTS

4. Since at the time of writing this report (January 10) we are still receiving gifts earmarked for 1982, I am unable to provide complete information.
5. Nevertheless I can say with real pride that total income from all sources in 1982 (which is estimated at \$248,000) will be approximately 4% greater than in 1981. Considering the present economic conditions, I am sure you will agree this is an outstanding achievement.
6. I have no doubt it will be of great interest to you that contributions from dentists of approximately \$72,000 will show an increase of close to 6% over the previous year, thus establishing a new all time high in gifts from the profession.
7. I am also pleased to report that estimated contributions from business and industry of \$84,500 will be slightly higher than in 1981 for another new record.
8. Sundry income and investment income recorded increases of approximately \$11,000 and \$2,000 respectively. The increase in sundry income is largely due to repayments of fellowship awards because of unfulfilled commitments. Part of the reason for the increase in investment income is that we asked companies to forward their 1982 contributions much earlier in the year and most of them complied with our request.
9. The foregoing increases more than offset decreases of approximately \$6,000 in gifts from dental organizations, \$1,000 in personal contributions from dental hygienists and \$2,000 in donations to the living memorial fund. You will remember that the 1981 total for dental organizations was increased by a most welcome gift of \$5,000 from the Toronto Academy of Dentistry.

CANADIAN FUND FOR DENTAL EDUCATION

INTERIM REPORT TO THE CANADIAN DENTAL ASSOCIATION BOARD OF GOVERNORS

MARCH 1983 - page 2

10. Also I am delighted to let you know that a much appreciated gift of \$3,000 was received in 1982 from the Crown and Bridge Study Club of the Toronto Academy of Dentistry to be added to the Club's existing endowment fund with CFDE. Including this gift the endowment fund now totals \$13,000 and the income therefrom is being used at the discretion of the Trustees for the benefit of dental education and research.

DISEBURSEMENTS

11. It is a pleasure indeed to report that in 1982 the Fund was able to provide approximately \$26,000 or 20% more assistance for our profession than in the previous year. To a large extent this was made possible by an excess of income over disbursements of \$24,000 in 1981.
12. Projects supported in 1982 were:
- | | |
|--|-----------|
| Teacher Training Fellowships (Dentists & Hygienists) | \$ 59,849 |
| Unrestricted Grants to Dental Schools | \$ 15,000 |
| Biennial Conference on Dental Research & Education | \$ 12,500 |
| Dental Students' Conference & Table Clinics | \$ 12,417 |
| Teacher Training Awards to Four Dental Schools
(Income from L. E. MacLachlan Endowment) | \$ 9,625 |
| Dental Teaching Conference | \$ 6,251 |
| Scholarships for Dental Students | \$ 4,750 |
| CDA-DAT Interview Workshop | \$ 4,451 |
| Dental Hygiene Research Conference & Educators
Workshop | \$ 3,500 |
| Sundry Awards | \$ 7,550 |
13. Grants awarded in 1982 totalled \$136,000 and expenses in connection with them were approximately \$23,000.
14. Management and fund raising expenses in 1982 as a percentage of income amounted to approximately 35% as compared with 34% in 1981. I am sure you will share my view that an increase of only 1% is a truly remarkable accomplishment, particularly in these inflationary times. We hope to do even better in this regard in 1983.

APPRECIATION

15. As you are no doubt aware, for the last thirteen years the President of each provincial dental association has co-signed with the appropriate Trustee our CFDE Month appeal letter mailed to all doctors in his province.
16. This cooperation has undoubtedly been an important factor in the substantial increase in contributions from this source and on behalf of

CANADIAN FUND FOR DENTAL EDUCATION

INTERIM REPORT TO THE CANADIAN DENTAL ASSOCIATION BOARD OF GOVERNORS

MARCH 1983 - page 3

my fellow Trustees I want to express our heartfelt thanks to these fine gentlemen.

17. It is always a bit dangerous to single out one person for special attention, however, I'm sure you will agree that in this instance the circumstances warrant it.
18. Early last fall we received a request from Dr. Robert D. Kinniburgh, President of the Alberta Dental Association, for detailed information about the Fund's activities. Naturally we were pleased to provide it but both surprised and delighted to subsequently learn that Dr. Kinniburgh wanted it to assist in the preparation of a letter he intended to forward to every dentist in his province.
19. I think the best measure of Dr. Kinniburgh's thoughtfulness and ability as a letter writer is to tell you that personal gifts from Alberta dentists went ahead in 1982 by almost \$2,000 or 21%.
20. I also want to thank the Canadian Dental Association for its continuing tangible support of our programs and for the most welcome and helpful publicity the Fund receives in the CDA Journal.
21. Last year, as you know, our genial Executive Director decided to "put on his old straw hat and go fishin", but in Murray McDonald's case that means golfing and bird watching.
22. I am glad to say though that Murray will still be with us on a consulting basis. So fortunately we will continue to have the benefit of his many years of experience in various fields.
23. Murray has done a tremendous job with the dental trade and foundations and has won the respect and friendship of dentists across Canada - no small task for a layman. We shall always be deeply indebted to him for the invaluable assistance he has given to the advancement of our profession.

Respectfully submitted,

David K. Peters, D.D.S.
Chairman
CFDE Board of Trustees

ADOPTION OF REPORT

The Board of Governors receives the Report of the Canadian Fund for Dental Education with thanks.

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

100 BRONSON AVENUE, OTTAWA CANADA K1R 6G8 (613) 236-5912

REPORT ON THE 1982 ANNUAL MEETING OF
THE NATIONAL DENTAL EXAMINING BOARD OF CANADA

I 1982 marks thirty-years in the existence of the Board.

II EXAMINATIONS

Effective in 1983, Québec will discontinue examining foreign trained dentists. The Order of Dentists of Québec has requested that the Board hold a comprehensive examination in Québec in 1983 and provide a sufficient number of French-speaking examiners. The Board has agreed with this request.

The 1983 examination schedule is as follows:

Comprehensive	-	May 16-June 2	-	Univ. of Montreal
Preclinical & Clinical	-	Aug 16-25	-	Univ. British Columbia
Written	-	Oct 17-19	-	selected univ. centres

The Board approved recently developed Guidelines for Selecting Written Examiners, the Chairman of Written Examinations and a Manual for Clinical Examiners.

Examination Statistics appear in Appendix I.

III CDA COUNCIL ON EDUCATION

Report of NDEB Representative

The NDEB Representative to the Council on Education stressed the importance of accreditation as a certification mechanism for the Board and stated that he is satisfied that Committee No. 1 (dealing with undergraduate, graduate and postgraduate programs) and the Council carry out their duties in a responsible manner.

The NDEB Representative to the Council on Education said that he was pleased with the formation of a subcommittee of Council to review existing guidelines and minimum requirements for undergraduate and specialty programs as well as to formulate guidelines for the clinical evaluation of students. The development of such guidelines and a more formalized approach to this part of accreditation are in the Board's interest.

IV ACCREDITATION STUDY

The Board decided to proceed with this study and the Chairman of the CDA Council on Education, and the NDEB representative to the Council on Education were appointed to the Accreditation Study Committee.

V CERTIFICATION REQUIREMENT FOR CANADIAN GRADUATES

The Board had received requests from Ontario and British Columbia Licensing Authorities for a change in certification requirements for Canadian graduates who do not obtain the NDEB certificate as current graduates. Ontario and British Columbia are requesting that the NDEB evaluation process include a clinical component.

V CERTIFICATION REQUIREMENT ETC(contd)

The Board unanimously carried the following motion:

WHEREAS the purpose of NDEB examinations is to establish that a candidate possesses the necessary cognitive and clinical skills for the competent practice of dentistry based on generally accepted Canadian standards

and

WHEREAS the written examination requirement alone cannot achieve the examination purpose (both written and clinical examinations are necessary)

and

WHEREAS the requirement of the written and clinical examinations for Canadian graduates would be consistent with the certification requirement of graduates of approved schools in the United States,

THAT By-law No. 36 be amended as follows:

«A graduate of an undergraduate dental program in Canada approved by the Council on Education of the CDA who does not make proper application prior to March 31 in the year of his graduation must take the written and clinical examinations of the Board and if successful will be granted the certificate of the Boards».

In the case of current graduates, the Board will undertake to inform by registered mail those final year students who have not applied by the certification deadline date, and permit a thirty-day extension of the deadline for receipt of the application for certification without examination.

The proposed By-law change will be forwarded to all provincial licensing authorities for approval. This issue to be finalized at the 1983 Annual Meeting.

VI REPORT OF THE COMMITTEE TO REVIEW THE ESTABLISHMENT OF
ELIGIBILITY OF CANDIDATES FROM UNAPPROVED SCHOOLS

Eligibility for foreign trained dentists to participate in The National Dental Examining Board of Canada examinations was granted in 1971.

To be certified by the NDEB, a graduate of an unapproved dental school needs to satisfy two types of requirements:
an educational requirement and an examination requirement.

The examination requirement is well formulated and established. The education requirement has traditionally consisted of proof of graduation from a university based dental school.

The Committee was charged to ascertain whether an alternate or more detailed procedure for establishing the education requirement could be established. After consulting with knowledgeable individuals in the education and licensing fields the committee recommended the following:

WHEREAS any procedure utilized by the Board in establishing the education requirement for foreign trained dentists must be defensible and in accordance with human rights legislation
and

WHEREAS the written and preclinical portions of the comprehensive examination may be considered to also serve the purpose of a screening mechanism

THAT the present method in establishing the education requirement for foreign trained dentists be continued.

The Board accepted the report and approved the recommendation.

VII CERTIFICATION ELIGIBILITY

The Board adopted the following new By-law:

- «41. A dentist who is a graduate of an unapproved undergraduate program in a university-based dental school, who enrolls in an approved undergraduate dental program in Canada, leading to a degree, who is unsuccessful in the regular final examination of the year in which he is enrolled or who withdraws from the year he is enrolled in prior to the final examination, will lose his eligibility for NDEB certification examinations».

The Board considers enrollment in an approved undergraduate program a process of evaluation and anyone who enrolls in such a program is voluntarily subjecting himself to the school's evaluation.

The above policy will not apply to anyone enrolled in an educational program not leading to a degree.

The substance of the above By-law will be forwarded to Deans of Canadian Dental Schools and the Deans will be asked to disseminate this information to foreign trained dentists who apply for entrance into undergraduate programs.

VIII NDEB/RCD(C)

The Board approved the revised NDEB/RCD(C) Certification Regulations. (Appendix II).

IX REPORT OF THE STUDENT REPRESENTATIVE

The Student Representative stated that Canadian dental students have an understanding and appreciation of the Board's function. This has been achieved by improved communications, principally through the special student brochure, Board member attendance at CDSC and student representative attendance at NDEB Annual Meetings.

X FINANCES

The Board's reserve fund decreased considerably in the past year as a result of unforeseen legal expenditures and an employee contract settlement. At present, the Board's reserve fund is less than half of the expenses projected for the next fiscal year.

The Board approved fee increases of 6% for current graduates and 11% for examinations.

XI CORRESPONDENCE

The Board had received a letter from the Canadian Dental Hygienists' Association asking the Board to consider the portability issue of hygienists.

The background of this issue is as follows: in 1973 the NDEB Act was amended to include dental specialists; at that time dental hygienists were asked if they wished to be included as well. The decision of the Canadian Dental Hygienists' Association in 1973 was not to participate in the activities of the Board.

The Board decided against any action on this matter by reason that the definition and duties of dental hygienists now vary greatly from province to province.

XII OFFICERS OF THE BOARD 1982/83

1. NDEB Executive Committee

President	- Dr. W.J. O'Driscoll
Vice-President	- Dr. R.B. Gilliland
Past-President	- Dr. R. Coulombe
Executive Members	- Dr. H.M. Dick
	- Dr. B. Goldberg

2. Chief Examiner for 1983 Spring - Dr. R. Coulombe

Chief Examiner for 1983 August - Dr. M. Balanko

3. Chairman of Written Examination - Dr. E.R. Ambrose

4. Written Examination Evaluation Committee

Dr. E.R. Ambrose	- Chairman
Dr. A.B. Hord	- Written Examiner Operative Dentistry
Dr. D.B. Proctor	- Written Examiner Oral Diagnosis

5. Preclinical and Clinical Examination
Evaluation Committee

Dr. R.	Coulombe
Dr. R.E.	Jordan
Dr. N.J.	Layton
Dr. G.W.	Myers

6. Appeals Review Committee

Dr. R.E. Jordan	(Chairman)
Dr. R.B. Gilliland	
Dr. B. Goldberg	

ACCEPTANCE OF REPORT

The Board of Governors accepts the Report of the National Dental Examining Board for information with thanks.

APPENDIX I

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

EXAMINATION DATA

I Written Examination
(Graduates of approved schools)

Year	Graduates in USA			Graduates in Canada		
	# of Cand.	# Succ.	% Succ.	# of Cand.	# Succ.	% Succ.
1971	22	18	82	12	4	33
1972	40	36	90	11	8	73
1973	30	25	83	12	10	83
1974	44	40	91	9	9	100
1975	46	43	93	5	4	80
1976	57	54	95	5	5	100
1977	86	78	91	6	4	67
1978	70	63	90	4	3	75
1979	18	17	94	4	4	100
1980	37	37	100	-	-	-
1981	15	15	100	1	1	100
1982	19	18	95	2	1	50

II Clinical Examination
(Graduates of approved schools in USA)

Year	# of Cand.	# Successful	% Successful
1979	3	2	67
1980	15	5	33
1981	16	4	25
1982	22	7	32

III Comprehensive Examination
(Graduates of unapproved schools)

Year	Written			Preclinical			Clinical		
	# of Cand.	# Succ.	% Succ.	# of Cand.	# Succ.	% Succ.	# of Cand.	# Succ.	% Succ.
1971	41	22	54	22	20	91	20	4	20
1972	44	26	59	26	18	70	27	9	30
1973	49	22	45	23	18	78	24	8	30
1974	45	27	60	27	23	85	37	16	43
1975	79	48	58	35	26	74	28	11	39
1976	91	57	63	46	25	54	48	16	33
1977	93	51	55	64	35	55	65	32	49
1978	80	52	65	63	34	54	48	20	42
1979	65	43	66	71	27	38	54	19	35
1980	94	55	59	79	37	47	59	16	27
1981	95	55	58	85	39	46	71	22	31
1982	120	66	55	83	35	42	57	15	26

5. Dentists who are NOT graduates of approved undergraduate programs will be required to pass the three-part comprehensive NDEB examination (written, preclinical and clinical) and be eligible for and be successful in the NDEB/RCD(C) examination (RCD(C) Membership examination) in order to obtain the NDEB/RCD(C) certificate.

DEFINITIONS

NDEB/RCD(C) examination or RCD(C) Membership examination (prior to 1981, the RCD(C) Part I examination) is an examination conducted by the RCD(C) in co-operation with the NDEB for the purpose of national specialist certification.

An approved post-graduate/graduate dental program is a program carrying CDA or ADA accreditation status or a program recognized by the RCD(C).

An approved undergraduate dental program is an undergraduate program carrying CDA or ADA accreditation status.

EXPLANATORY NOTE

- | | |
|---|--|
| The NDEB/RCD(C) (RCD(C) Part I) examination from January 1, 1975 to June 1980 | - the Part I examination (written) was altered at this time to include clinical content |
| The NDEB/RCD(C) (RCD(C) Membership) examination June 1981 | - the Part I examination was further altered to include a separate oral examination (in addition to the written examination) of a clinical nature in each specialty and is now referred to as the Membership examination |

December 1982

APPENDIX II

THE NATIONAL DENTAL EXAMINING BOARD OF CANADA
LE BUREAU NATIONAL D'EXAMEN DENTAIRE DU CANADA

100 BRONSON AVENUE, OTTAWA CANADA K1R 6G8 (613) 236-5912

THE ROYAL COLLEGE OF DENTISTS OF CANADA

REGULATIONS REGARDING THE

NDEB/RCD(C) SPECIALIST CERTIFICATE

PREAMBLE

Holders of the NDEB/RCD(C) Specialist Portability Certificate are entitled to registration as specialists in participating provinces, providing all other provincial licensing authority requirements are met.

Dentists who are graduates of approved undergraduate programs in the USA may be required to pass the NDEB generalist examination (written and clinical) in order to be licensed in a province as a generalist and be eligible for specialty licensure.

The fee for the certificate is the same as that for current Canadian graduates receiving the NDEB generalist certificate and is payable to the NDEB.

1. Fellows of the RCD(C) who have obtained their Fellowship by examination will be granted the NDEB/RCD(C) certificate, upon application to the NDEB, within five years of obtaining Fellowship, after which time successful completion of the NDEB/RCD(C) examination (i.e. RCD(C) Membership examination) will be required (subject to Item 5. of these Regulations).
2. Dentists who have successfully completed the NDEB/RCD(C) examination (RCD(C) Membership examination) will be granted the NDEB/RCD(C) certificate, upon application to the NDEB, within five years of completing the examination (subject to Item 5. of these Regulations).
3. Dentists who are graduates of approved undergraduate and approved post-graduate programs (or of other specialty programs) recognized by the RCD(C) are eligible for the NDEB/RCD(C) examination (i.e. the RCD(C) Membership examination) in order to obtain the NDEB/RCD(C) certificate.
4. Dentists who have graduated from approved undergraduate programs and who are registered in approved post-graduate or graduate programs who apply to the NDEB prior to March 31st in their year of graduation will be eligible for the NDEB/RCD(C) examination (RCD(C) Membership examination) in order to obtain the NDEB/RCD(C) certificate upon graduation.

ENDODONTICS

REPORT OF THE CANADIAN ACADEMY OF ENDODONTICS TO THE MARCH 1982 BOARD OF GOVERNORS

The annual meeting of the Canadian Academy of Endodontics was held in Montreal, Quebec from October 24-26, 1982. Dr. Herb Borsuk of Montreal was the chairman for this very successful session. The scientific program was highlighted by a presentation by Dr. Ron Melczak of Montreal and was well attended by 146 members and guests.

Dr. Michael Sherman of Hamilton was chairman of the Endodontic Teacher's Conference on the day preceding the annual meeting.

Our next annual meeting will be held in Winnipeg, Manitoba in October, 1983.

The newly elected executive are as follows:

Past President	- Dr. Joel Edelson, Toronto, Ontario
President	- Dr. Michael Sherman, Hamilton, Ontario
President-Elect	- Dr. Marshall Peikoff, Winnipeg, Manitoba
Treasurer	- Dr. Barry Korzen, Willowdale, Ontario
Executive Secretary	- Dr. John Phillips, Oshawa, Ontario

A new membership roster was published this year.

Several articles by C.A.E. members are now being processed by Dr. Marshall Peikoff for publishing in the C.D.A. Journal.

Respectfully submitted

John M. Phillips,
Executive Secretary
Canadian Academy of
Endodontics

ACCEPTANCE OF REPORT

The Board of Governors accepts the Report of the Canadian Academy of Endodontics for information with thanks.



canadian association of
oral and maxillofacial surgeons

association canadienne des spécialistes
en chirurgie buccale et maxillo-faciale

Date: February 28, 1983
From: Dr. Murray E. Mickleborough
Re: REPORT OF THE C.A.O.M.S.
To: Canadian Dental Association
Board of Governors Meeting
March 1983

A present Slate of Officers of the C.A.O.M.S. 1982 - 1983 is as follows:-

PRESIDENT	- Murray E. Mickleborough, Edmonton, Alta
PRES-ELECT	- Pierre Surprenant, Sherbrooke, Quebec
PAST PRESIDENT	- Jack Gryfe, Toronto, Ontario
SECRETARY	- Brian Abrams, Calgary, Alberta
TREASURER	- Ronald E. Warren, Edmonton, Alta.
ADVISORY/NOMINATING	- J. Gryfe, Toronto, Ontario
CONVENTION 1983	- Bill Walters, Vancouver, B.C.
CONSTITUTION	- E. Millar, Montreal, Quebec
HOSPITAL SERVICES	- David Precious, Halifax, Nova Scotia
INTERNATIONAL AFFAIRS	- Al Swanson, Vancouver, B.C. (1986)
INSURANCE	- W. Prusin, Scarborough, Ontario
MEMBERSHIP	- Louis Trudel, Sherbrooke, Quebec
EDUCATION	- F.W. Lovely, Halifax, Nova Scotia
INFORMATION/NEWSLETTER	- Vic Moncarz, Scarborough, Ontario

The proposed Slate of Officers to be inducted in June of 1983 is as follows:- Term of office is two years.

PRESIDENT	- Pierre Surprenant, Sherbrooke, Quebec
PRES-ELECT	- Ronald E. Warren, Edmonton, Alta
PAST PRESIDENT	- Murray E. Mickleborough, Edmonton, Alta
SECRETARY	- Aron Gonsior, Montreal, Quebec
TREASURER	- ?
ADVISORY/NOMINATING	- Murray E. Mickleborough, Edmonton, Alta
CONVENTION 1984	- Ronald E. Warren, Edmonton, Alta
HOSPITAL SERVICES	- Colin Foster, Winnipeg, Manitoba
INTERNATIONAL AFFAIRS	- A. Swanson, Vancouver, B.C.
INSURANCE	- Don Pelkey, Riverview, New Brunswick
MEMBERSHIP	- Louis Trudel, Sherbrooke, Quebec
EDUCATION	- Brian Abrams, Calgary, Alta
INFORMATION/NEWSLETTER	- Vic Moncara, Scarborough, Ontario

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canadian association of
oral and maxillofacial surgeons

association canadienne des spécialistes
en chirurgie buccale et maxillo-faciale

- 2 -

For the information for the Board of Governors and other Specialty Section Members, the C.A.O.M.S. future Convention dates and venues are as follows:-

1983	VANCOUVER	June 3th - June 5th
	Hotel	Bayshore Inn
	Conv.Chairman	Dr. W.S. Walter
	Scientific Chairman	Dr. S. Fisher
	<u>Main Topic</u>	Facial Pain
1984	BANFF	March 14th - March 20th
		Ski Week
		Meeting March 17 - 18
	Hotel	Banff Park Lodge
	Conv.Chairman	Dr. R.E. Warren
	Scientific Chairman	Dr. P. Luxford
	<u>Main Topic</u>	Business Administration
1985	MONTREAL	May 3rd - May 5th
	Hotel	Sheraton Center
	Conv.Chairman	Dr. B. Sternthal
	Scientific Chairman	Dr. T. Head
	Conjoint Meeting with:	Great Lakes Society
	<u>Main Topic</u>	Acupuncture
		Cranio Facial Osteopathy
1986	VANCOUVER	May 21st to May 25th
	9th INTERNATIONAL CONFERENCE ON ORAL SURGERY	
	Conv. Chairman	Dr. A. Swanson
1987	HALIFAX	May ?
	Hotel	To be decided later
	Conv. Chairman	Dr. P. Cyr
	Scientific Chairman	Dr. McInnis
	<u>Main Topic</u>	To be decided later

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canadian association of
oral and maxillofacial surgeons

association canadienne des spécialistes
en chirurgie buccale et maxillo-faciale

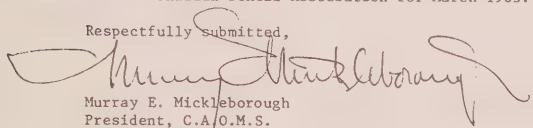
- 3 -

The C.A.O.M.S. has now been formally awarded the 1986 International Association of Oral and Maxillofacial Surgeons' Meeting to be held in Vancouver, B.C. May 21st - May 25th, 1986. Dr. Al Swanson is Convention Chairman and has been extremely busy with his local organization committee in association with the Executive of the C.A.O.M.S. to finalize plans with the International Executive. Five members will be attending the 8th International Conference on Oral Surgery in Berlin, West Germany in the latter part of June 1983 to further publicize our 1986 meeting.

The C.A.O.M.S. has at this time approximately 160 active members who incidently are all card-carrying members of the Canadian Dental Association. A Scientific Meeting was held in Toronto in October 1982. The topic of Pre-Operative, Intra-Operative and Post-Operative Care of the Major Oral and Maxillofacial Surgical Patient, was discussed in detail. The meeting was very well attended with approximately 80 percent of our membership participating.

The above material represents the Report to the Board of Governors of the Canadian Dental Association for March 1983.

Respectfully submitted,



Murray E. Mickleborough
President, C.A.O.M.S.

MEM/jlc

ACCEPTANCE OF REPORT

The Board of Governors receives the Report of the Canadian Association of Oral and Maxillofacial Surgeons for information with appreciation and thanks.



THE ASSOCIATION OF PROSTHODONTISTS OF CANADA
L'ASSOCIATION DES PROSTHODONTISTES DU CANADA

REPORT

TO: The Canadian Dental Association
FROM: The Association of Prosthodontists of Canada
DATE: February 28, 1983

Annual Clinical Sessions

The Annual Clinical Sessions of the Association of Prosthodontists of Canada were held in Montreal on October 22, 23, 1982. The program consisted of the following presentations:

- Dr. K. C. Bentley - Systemic Conditions Influencing Prosthodontic Treatment
- Dr. George A. Zarb - Dental Implants - Review of a Position Paper
- Dr. Clifford Fox - Occlusal Treatment Considerations
- Dr. Ralph Brooke - Oral Conditions Influencing Prosthodontic Treatment
- Dr. Robert E. Hoar - Management of the Radiated Patient
- Dr. Denny M. Smith - Neurological Disorders in Prosthodontics

The program was very well received by the members in attendance.

Lorne E. MacLachlan Prosthodontic Conference

The Annual Session of The Association of Prosthodontists of Canada was preceeded on Thursday, October 21 by the Second Lorne E. MacLachlan Prosthodontic Teaching Conference, facilitated by the Association. The topic of the conference was, "The Teaching of Maxillofacial Prosthodontics in the Undergraduate Curriculum". All but one of the Canadian Faculties of Dentistry were represented at the conference. The conference was chaired by Dr. Bruce Graham with Dr. Robert E. Hoar as resource person. Representatives of the various faculties made presentations on their current activities. Discussions revolved around what is being done, what should be done, and what can reasonably be done in the under-graduate curriculum in the area of Dental Oncology and Maxillofacial Prosthetics.

...?

REPORT

Canadian Dental Association

Re - The Association of Prosthodontists of Canada

Page 2.

Annual Business Meeting

Steps were taken during the annual meeting to amend the ByLaws to provide for an enlarged Executive Council and the creation of Standing Committees with responsibilities for: Archives, Clinical Practice, Constitution, Continuing Education, Education, Research and Scientific Sessions as well as the existing Nominating Committee. It is hoped that this will provide an opportunity for greater participation in the affairs of the Association by its members. More importantly, it is hoped through this mechanism to make the Association more active and responsive to the needs of its members and to provide greater and more expedient consultations and support to The Canadian Dental Association.

The Association also approved in principle, a status report on implants. This is currently under revision by Dr. Zarb and ultimately will be forwarded to The Canadian Dental Association.

In response to a letter from the CDA Director of Accreditation, Dr. V. Chatwin, the Executive Council of APC appointed an Ad Hoc Committee consisting of Drs. Zarb, Love and Chaytor to review the current guidelines for graduate/post-graduate programs in Prosthodontics. That committee is keen to address the issue but feels it is appropriate to wait for the results of the review currently underway in the United States. Drs. Chaytor and Love participated in a workshop on the subject conducted by the Federation of Prosthodontic Organizations in Chicago, April 19-21, 1982.

Future Meetings

1983

1983 Annual Scientific Session will be held on Sunday, September 25, in Vancouver, under the Chairmanship of Dr. David Donaldson of British Columbia. It will be preceded on September 24 by an Executive Council meeting and followed by the Annual Business meeting.

The Association is grateful for the cooperation of the Executive Director and the Director of Education of The Canadian Dental Association and its convention Chairman in reaching this decision.

1984

The Association decided to hold its 1984 meeting during the third week of October in Toronto and plans to once again facilitate a Lorne E. MacLachlan Prosthodontic Teaching Conference in conjunction with its Annual Session.

1985

The Association voted to hold its 1985 Annual Sessions in Ottawa with The Canadian Dental Association convention on the assumption that it will be held in the fall of the year and that satisfactory arrangements can be made.

REPORT

Canadian Dental Association

Re - The Association of Prosthodontists of Canada

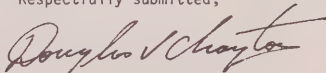
Page 3.

Executive Council for 1982-1983

President
President Elect
Vice-President
Past-President
Secretary-Treasurer
Councillors

Dr. Paul Jean
Dr. Paul Sills
Dr. Jim Anderson
Dr. Doug Chaytor
Dr. Brock Love
Dr. Shaukat Chaney
Dr. John Blomfield
Dr. Bruce Graham
Dr. Alex Bowman

Respectfully submitted,



D. V. Chaytor
Past President
The Association of Prosthodontists
of Canada

DVC/clc

cc: Dr. Brock Love, Secretary Treasurer
Dr. Paul Jean, President
Dr. George Zarb

ACCEPTANCE OF REPORT

The Board of Governors receives the Report of the Association of Prosthodontists of Canada for information with thanks.



THE ROYAL COLLEGE OF DENTISTS OF CANADA
LE COLLEGE ROYAL DES CHIRURGIENS DENTISTES DU CANADA

SUITE 614, MEDICAL ARTS BUILDING

170 ST. GEORGE STREET, TORONTO, ONTARIO, CANADA M5R 2M8

(416) 964-7263

REPORT TO

THE BOARD OF GOVERNORS
CANADIAN DENTAL ASSOCIATION

March 4-5, 1983

Preparations for the Symposium on Periodontal Diseases are well in hand. The programme chairman is Dean G.S. Beagrie, a former President of the College. The Symposium will be an integral part of the Annual Meeting of the Canadian Dental Association to be held in Vancouver. As with previous symposia it will be open to all registrants at the C.D.A. meeting.

The following distinguished periodontists have agreed to participate:

Dr. Harold Loe, Director of the United States National Institute of Dental Research, Bethesda, Maryland, a periodontist and research worker of international repute, will speak on Prevention and Diagnosis.

Dr. D.M. Brunette, a basic research worker who has done a lot of work on the periodontal ligament and who is now at the University of British Columbia, will discuss Periodontal Disease Structure and Metabolism.

Dr. A.L. Ogilvie, Head of the Department of Periodontics at the University of British Columbia, Director of the graduate programme and a Fellow of the College, will speak on the effects of the growth of periodontal education and its influence on therapy.

Dr. M. Deporter, a periodontist and periodontal research worker with a particular interest in inflammation, from the University of Toronto, will speak on pathogenetic mechanisms.

Dr. B.C. McBride, of the University of British Columbia, who researches in bacteriological fields will review the microbiology of periodontal disease.

Finally, two periodontists on the clinical staff of the University of British Columbia, Drs. Basaraba and Lahiffe, will discuss current methods of treatment.

page 2
Report to the
CDA: March 4-5/83

There will be appropriate discussion and question periods.

As with previous symposia that the College has mounted as part of a C.D.A. annual meeting, the costs involved are beyond the resources of the College and we are again obliged to seek outside support. The Colgate/Palmolive Company have made a generous contribution but so far we have had no response from the Federal Government, to whom we have made application for the balance of the expenses. For earlier similar symposia, C.D.A. guaranteed the College against loss, and on one occasion, C.D.A. contributed to the College expenses. We were disappointed to learn that this year C.D.A. has not found it possible to guarantee us again. If the Federal Department of Health and Welfare does not grant us aid, this will mean that the Symposium will have to be altered by reducing the number of participants.

The Royal College of Dental Surgeons of Ontario has recently decided that they will not permit Members of the College to use the accepted abbreviation M.R.C.D.C. This is the qualification which several other provincial licensing authorities use as the certifying examination for specialist registration. So we are now in an Alice-in-Wonderland situation where the qualification required for a specialist to be recognized in most provinces is not permitted even to be used in one. In the view of the College, it is unfortunate that Ontario sets lower standards for specialist recognition than do most provinces, in view of the size and influence of this province.

The situation is the result of old feuds that go back to the original formation of the College by C.D.A. At that time many specialists, who were not among those chosen to become charter fellows, developed a very understandable antipathy toward the College, which has been expressed in various ways. One of these ways has been to persuade the R.C.D.S. not to allow the use of the Membership qualification. However, we hope that reason will prevail in this regard, and not only will the Ontario College recognize the Membership but also that they will raise their standards for specialist recognition to that currently in use in most parts of the country.

Examinations for Fellowship in the College were held in December. Of eighteen candidates, twelve were successful.

The College now has a total of 483 Fellows and Members. There are approximately 950 specialists in Canada altogether, so roughly half are now in the College. You will recall that when the Canadian Dental

page 3
Report to the
CDA: March 4-5/83

Association established the College in 1965, the intention was that all dental specialists in Canada would become members. It has taken the College eighteen years to achieve just half of its objective, but the percentage is steadily increasing, and at the present rate of progress it should not require anything like another eighteen years to achieve the objective completely.

J.H.P. Main
President

March 5, 1983

ACCEPTANCE OF REPORT

The Board of Governors receives the Report of the Royal College of Dentists of Canada for information with thanks.

ANNUAL
MEETING
BOARD OF GOVERNORS
CANADIAN DENTAL ASSOCIATION

OTTAWA, ONTARIO

September 23-24

1 9 8 3

OBSERVERS

CDA Staff:

D.V. Chatwin, Director of Accreditation	J. Scrimger, Business Manager
D. Goodwin, Director of Communications	L. Teteruck, Director of Education
C. Metcalfe, Editor	

NAME

REPRESENTING

T. Barker	Council on Student Affairs
G.S. Beagrie	Faculty of Dentistry, U.B.C.
I.C. Bennett	Faculty of Dentistry, Dalhousie University
L. Berry	Cdn. Dental Hygienists' Association
R.I. Brooke	Faculty of Dentistry, U.W.O.
M. Boucher	Ordre des dentistes du Québec
E. Busvek	Council on Student Affairs
K.D. Butler	Cdn. Dental Services Plans Inc.
J.M. Creighton	Nova Scotia Dental Association
K.L. Croft	College of Dental Surgeons of B.C.
T. Curry	Cdn. Society of Public Health Dentists
J. Dillon	Manitoba Dental Association
R. Filion	Royal College of Dental Surgeons of Ontario
G.S. Foster	Alberta Dental Association
C. Gallant	Cdn. Dental Services Plans Inc.
J.C. Gillies	Ontario Dental Association
T. Gushue	Newfoundland Dental Association
B. Hewton	Cdn. Dental Hygienists' Association
P. Jean	Ecole de medecine dentaire, Université Laval
I. Kleysteuber	Cdn. Fund for Dental Education
G. Kravis	National Dental Examining Board
P.Y. Lamarche	Ordre des dentistes du Québec
M.A. Lasko	Manitoba Dental Association
N. Layton	National Dental Examining Board
B. Love	Association of Prosthodontists of Canada
G. MacDonald	Newfoundland Dental Association
J.H.P. Main	Royal College of Dentists of Canada
G. Maranda	Cdn. Assoc. of Oral & Maxillofacial Surgeons
B.P. Martinello	Alberta Dental Association
R.H. McIntyre	Manitoba Dental Association
R.L. Moran	Cdn. Dental Services Plans Inc.
D. Pamenter	Nova Scotia Dental Association
M. Peikoff	Cdn. Academy of Endodontics
P. Porter	Dental Association of P.E.I.
C. Price	Cdn. Academy of Oral Radiology
W.P. Reed	College of Dental Surgeons of Saskatchewan
J.F. Reid	CDA Past-President
K.L. Roach	Ontario Dental Association
A. Schwartz	Faculty of Dentistry, University of Manitoba
J.E. Speck	Royal College of Dentists of Canada
G.W. Thompson	Association of Canadian Faculties of Dentistry
J.G. Thompson	New Brunswick Dental Society
A. Trembley	Assoc. des chirurgiens dentistes du Québec
A. Vaillancourt	Faculté de médecine dentaire, Université de Montréal
R.D. Wenn	Dental Association of Prince Edward Island
C. Worobey	Cdn. Dental Hygienists' Association
D.J. Yeo	Dental Faculty, U.B.C.

CANADIAN DENTAL ASSOCIATION

BOARD OF GOVERNORS

OFFICERS & OFFICIALS

Chairman of the Board of Governors N.A. Mancini

EXECUTIVE COUNCIL

W.R. Thompson, President	P.R. Crawford	T.E. Ramage
R.N. Hicks, President-Elect	B.W. Holmes	J. Robertson
D.E. Williams, Past President	J. Laporte (absent)	D.L. Thompson

Executive Director: H.E. Drouin

BOARD OF GOVERNORS

ALBERTA:	NEWFOUNDLAND:	PRINCE EDWARD ISLAND:
E.F. Allison	G. Anthony	J. Robertson
D.L. Thompson		
BRITISH COLUMBIA:	NOVA SCOTIA:	QUEBEC:
M.J.R. Leitch	J. Christie	C. Chicoine (alternate)
R.J. Markey		Y. Giguere
T.E. Ramage	ONTARIO:	
J.G. Silver	R.J. Bell	SASKATCHEWAN:
	B.H. Dolansky	J.W. Niedermayer
MANITOBA:	B.W. Holmes	
P.R. Crawford	R.R. Schiewe	CDN. FORCES DENTAL SERVICES:
	D.B. Smith	J.N. Wright
NEW BRUNSWICK:		
R.A. Turcotte		STUDENT REPRESENTATIVE:
		D. McLeod
HEALTH & WELFARE:	VETERANS AFFAIRS:	
D.G. Ross (alternate)	J.C. Tsafaroff	

Recording Secretary: Mrs. P. Cunningham

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R.Y. Barolet (Dental Materials & Devices)	A. Thivierge (Student Affairs)
G.R. Thordarson (Ethics)	Y. Kamachi (Information Services)
J.E. Durran (Insurance & Investment)	G.H. Peacock (Constitution & By-laws)
M. Gornitsky (Hospital Services)	K.C. Bentley (Education)
H.W. Horsman (Health Care)	D.E. Williams (Nominations)

PRESIDENT'S REPORT
CDA BOARD OF GOVERNORS
September 23, 1983

Mr. Chairman, Colleagues:

I extend a warm welcome today to all members of the Board of Governors, the Chairmen of the CDA Councils and Committees, the Presidents and Chief Executive Officers of Provincial Dental Associations or Societies, representatives of CDA affiliated Specialty Sections, representatives of Licensing Bodies and of the NDEB, ACFD, RCD(C), CDHA, CDAA and indeed any others who have joined with us today.

We will be especially honoured during this meeting to have the President of the International Dental Federation (or FDI), Dr. Thorsten Aggerd of Sweden, attend our meeting tomorrow and speak to us on that organization for a few minutes. We are also pleased that during our Convention, a representative of the Australian Dental Association, Dr. Gordon Rowell and his wife will be in attendance.

I indeed extend a special welcome to any of you who are attending your first Board of Governors meeting and I congratulate you on being selected. You will, I am sure, find the meeting interesting, lengthy, at alternating times stimulating and exasperating, but hopefully always productive.

The Board of Governors members are those individuals charged with the responsibility of approving policy changes in this organization and in that way are directly responsible to those dentists in Canada who are CDA members and indirectly to all Canadian dentists. It is at times difficult to focus our thoughts and indeed our decisions from local and provincial spheres to reflect nationally on what is best for dentistry in Canada - but that is our mandate.

PRESIDENT'S REPORT

To assist and guide us in our deliberations, I am most pleased that we have our Chairman, Dr. Nick Mancini, who has the background knowledge, the foresight and the impartiality, combined with an excellent sense of humour, to ensure we progress.

I do not intend to discuss any specific subjects this morning -- all of the important ones are coming up in the Board meeting. However, I would like to relate that the meeting of the CDA Executive with the Presidents and Chief Executive Officers yesterday was most worthwhile in exploring a number of issues and in bringing us all up to date on the most current provincial areas of concern. I thank all those who participated so fully.

As the end of the Board of Governors meetings often tends to be somewhat rushed, I would like to do two things now instead of late tomorrow. I would like to congratulate Mr. Drouin and the entire CDA staff for their responsible, competent and extensive efforts on our behalf during the past year. I have been in a position to observe such activities much more closely than most presidents and I consider we are most fortunate in the calibre of personnel and for their interest, enthusiasm and productivity. I would ask them all to stand and you to join me in recognizing them.

I also this morning wish to recognize the efforts over the past three years of our Past President, Dr. Don Williams, who will leave the Board after this meeting. Don Williams has given a great deal of effort and dedication to the CDA and I do not think anyone has a better knowledge of past happenings or indeed is more current about dental issues. Thank you very much, Don, for your support to me personally, your friendship, and your efforts for organized dentistry.

PRESIDENT'S REPORT

Ladies and Gentlemen, I will have an opportunity at Tuesday's luncheon to say some further words and at that time I shall certainly be speaking of our new President, Dr. Hicks and extending our thanks to Dr. Ramage and his Convention Committee, but we must now progress with the meeting.

We have many important reports as well as our extensive Constitution and Bylaws revisions and two special Ad Hoc Committee reports, so our work is cut out for us. Together, however, we have an opportunity to participate, to meet the challenges and to evolve policy decisions.

Thank you.

EXECUTIVE

REPORT OF THE EXECUTIVE COUNCIL TO THE 1983 ANNUAL BOARD OF GOVERNORS

Members: Dr. W.R. Thompson, Ottawa, Chairman
Dr. P.R. Crawford, Winnipeg
Dr. R.N. Hicks, Vancouver
Dr. B.W. Holmes, Kenora
Dr. J. Laporte, Quebec
Dr. T.E. Ramage, Vancouver
Dr. J. Robertson, Summerside
Dr. D.L. Thompson, Calgary
Dr. D.E. Williams, Moncton

Council Meetings

Since the March Interim Board of Governors meeting, Executive Council has met on two occasions, namely May 7-8th and July 8-9th, 1983.

Items of Business Requiring Board Action

Management Committee

Appointment of Auditors

RESOLVED:

83.17 *THAT the firm of McCay-Duff & Company
be appointed CDA auditors for the
fiscal year 1983.*

ADOPTED

Budget Projection

The 1984 Budget was reviewed and is appended herewith.

RESOLVED:

83.18 *THAT the 1984 Budget be accepted as
circulated, subject to approval of
unbudgeted items.*

APPENDIX A

ADOPTED

Explanatory notes are included with the budget forecasts to assist the Governors with their deliberations.

EXECUTIVE

Items of Business Requiring Board Action

CDSPI Appointments

Executive Council considered names put forward by the provinces of Ontario and Quebec for representatives to CDSPI.

RESOLVED:

- 83.19 *THAT the CDA representative from Ontario to the CDSPI Board of Directors be Dr. R.L. Moran, for the calendar year 1984.*

ADOPTED

RESOLVED:

- 83.20 *THAT the CDA representative from Quebec to the CDSPI Board of Directors be Dr. R. Dupont, for the calendar year 1984.*

ADOPTED

Note: Appointees will be requested to complete CDA Conflict of Interest forms.

CDSPI (Insurance and Investments)

To comply with Article XVI, Section 4 h) Council on Insurance and Investments, it is

RESOLVED:

- 83.21 *THAT the Board of Directors of CDSPI be appointed the CDA Council on Insurance and Investments for the calendar year 1984.*

ADOPTED

Editorial Board

APPENDIX B

The report of the Editorial Board was reviewed by the Executive Council as appended and the recommendation therein to discontinue circulation of the CDA Journal to approximately 4,000 non-members was carefully considered.

It is the decision of the Executive Council not to accept the following recommendation but to submit this item to the Board of Governors for review.

EXECUTIVE

Items of Business Requiring Board Action

RESOLVED:

- 83.22 *THAT the distribution of the CDA Journal to non-members without charge be discontinued.*

ADOPTED

Ad Hoc Committee on Hospital Services

The report of the Ad Hoc Committee on Hospital Services was reviewed as appended and the formation of two new councils as outlined was accepted by the Executive Council.

APPENDIX C

The Councils on Education and Hospital Services are restructured according to the terms of the report to affect the least disruption in the present services.

THAT the report of the Ad Hoc Committee on Hospital Services be accepted as circulated.

DEFEATED

RESOLVED: (on motion from the floor)

- 83.23 *WHEREAS Hospital Accreditation is being folded into primarily an academic process, it is suggested*
- THAT the report be received; and that*
- a) written comment and recommendations to CDA by all concerned be received by December 1, 1983;*
 - b) a delegation of five members of the Council on Education meet with the Council on Hospital Services at the end of October to prepare a joint report offering comments and recommendations;*
 - c) the Ad Hoc Committee sit and report on the comments and recommendations to the first Executive Council meeting in 1984;*
 - d) the report be on the agenda for the Interim Board meeting in April, 1984 for reconsideration.*

ADOPTED

EXECUTIVE

Items of Business Requiring Board Action

Membership Committee Report

The report of the Membership Committee was reviewed as appended.

APPENDIX D

RESOLVED:

83.24

THAT March 31 be accepted as the official date on which all individuals who have not paid their membership fees will be designated as non-members. All member services will thereafter not be available to that individual.

ADOPTED

83.25

THAT the definition of Student Member be changed to accommodate full-time post-graduate students; and

THAT the CDA by-laws be amended according to the appended definition.

ADOPTED

Life Member Applications

Applications for Life Membership were reviewed by the Executive Council and accepted as per list appended.

CDSPI Loss Prevention Seminars

Recommendations relating to the Loss Prevention Seminars conducted by CDSPI were considered by the Executive Council, as submitted in the appended report of the Council on Insurance and Investment.

RESOLVED:

83.26

THAT items 1-5 in the CDSPI Loss Prevention Seminar recommendations to the CDA document be approved subject to:

- a) all applicants for malpractice insurance being informed of the conditions included in item 5;*

EXECUTIVE

Items of Business Requiring Board Action

RESOLUTION 83.26 - continued

- b) information on claims and repeat offenders outlined in item 5 being disseminated to licensing bodies on a regular basis, only if they request such information.*

ADOPTED

RESOLVED:

83.27

THAT CDSPI be requested to implement items 1-5 without cost to the CDA; and

THAT items 6-11 of the same document be recommended for implementation by the licensing bodies in each Canadian province.

ADOPTED

Other matters requiring Board action follow under Council reports. The following items are representative of the activities of the Executive Council since the last Board of Governors meeting.

Matters for Information

Caribbean Dental Program - CIDA/CDA

In April 1983, Dr. John G. Blackmer visited the islands of St. Kitts and Nevis, B.W.I., representing the CDA in a joint program with CIDA and the province of New Brunswick. This was an exploratory visit to determine the status of dental health of school children and to prepare an appropriate mouth rinse program. Implementation is scheduled for the fall of this year and it is anticipated that the continuation of the program will become an Island responsibility.

Executive Council acknowledges the financial support of CIDA and the government of New Brunswick, and Dr. Blackmer's volunteer efforts to carry out this valuable program in a developing country.

EXECUTIVE

Matters for Information

Committee on Salaried Dentists

Executive Council reviewed the appended report of the Committee on Salaried Dentists and concurred with the majority of the recommendations therein.

APPENDIX E

A standing Committee on Salaried Dentists will be formed, according to the attached terms of reference, reporting to the Executive Council.

Federation Dentaire Internationale

Dr. Thorsten Aggeryd, President of FDI graciously accepted an invitation to attend the Annual Board of Governors meeting and to address the attendants on September 24th.

The FDI had requested CDA to submit names of consultants to commissions and the following nominations have been forwarded for consideration:

Dr. W.R. Thompson, President CDA
Commission on Defence Forces Dental Services

Brig.-Gen. J.N. Wright, Director General CFDS
Commission on Defence Forces Dental Services

Dr. G. Kravis, Registrar, National Dental Examining Board
Commission on Dental Education and Practice

Dr. D. Donaldson, Dental Faculty, University of British Columbia
Commission on Dental Education and Practice

Dr. W.R. Bedford, Senior Consultant, Dentistry, Health & Welfare
Commission on CORE

Dr. M. Williamson, Dental Faculty, University of British Columbia
Commission on Dental Education and Practice

Dr. J. Stamm, Dental Faculty, McGill University, Montreal
Commission on Oral Health Research and Epidemiology

EXECUTIVE

Matters for Information

Product Acceptance Committee

The Report of the Product Acceptance Committee was reviewed by the Executive Council and is appended for information.

APPENDIX F

Taxation Committee

The report of the Taxation Committee is appended for information. The Committee has been investigating several items in recent months, namely:

APPENDIX G

- a) Bill C-139 - Professional Management Companies
and Personal Services Corporations;
- b) Duty on Dental Gold;
- c) Pre-tax Pension Contributions

Audits by Revenue Canada of professional management companies are causing considerable concern, and arrears in the range of \$22,000 to \$58,000 are being assessed by the federal government.

Manpower Supply Study

An updated report on uses of the CDA Manpower Model has been reviewed by the Executive Council.

Provincial associations and several provincial and federal government departments have relied on the CDA Manpower Supply Study as reference. A number of provinces have indicated that this study should be kept updated and the Executive Council agrees.

This item will be on the agenda for discussion at the Presidents/Chief Executive Officers, Corporate Members meeting on September 22, 1984, preceding the Board of Governors meeting.

Assignment

The Executive Council has surveyed the provincial associations regarding present policies on the subject of assignment.

This information will be referred to the Council on Health Care for recommendation on the present CDA policy in this regard as it relates to the pre-paid dental plans document.

EXECUTIVE

Matters for Information

Government Relations

a) Dental Treatment for Indian & Inuit People

On the recommendations of a Subcommittee of the Council on Health Care, terms of reference for a Review Committee were accepted by the Executive Council. The report is appended for information.

APPENDIX H

The document was forwarded to corporate members, licensing authorities and the ACFD with a request for names of resource persons for the Review Committee, as outlined. A pool of names is now on hand at CDA and Dr. W.R. Bedford, Senior Dental Consultant, Health and Welfare has been informed of the interest in this program.

b) Steering Committee on Dental Hygiene - Health & Welfare

Executive Council was informed of a newly structured Steering Committee on Dental Hygiene. Representation was requested by Health & Welfare and this was reviewed by the Executive Council.

Names have been forwarded to the Steering Committee as a result of this action and the Executive has been informed that the Committee will now be called the Advisory Committee on the Development of Clinical Practice Standards for Dental Hygiene. The representatives have been named to the Committee by CDA in an on-going role to assist working groups.

It is understood that the Advisory Committee will report to the Working Group on Dental Hygiene.

c) Agreements Between Medical Services Branch & Provinces

A status report was provided by Health and Welfare, Medical Services Branch and is appended hereto.

APPENDIX I

A number of agreements are already in effect and negotiations are continuing for other provincial contracts.

Awards

Distinguished Service Award

Executive Council wishes to announce that the recipient of the Distinguished Service Award will be Dr. D.J. Yeo because of his generous contribution to the deliberations of the Association over the past years.

APPENDIX J

EXECUTIVE

Matters for Information

Awards - continued

Honorary Member

Applications were submitted by CDA corporate members and reviewed by the Executive Council.

The following dentists who have contributed so significantly to the CDA and organized dentistry in general will be the recipients of the Honorary Member awards for 1983:

Dr. William Miller, Vancouver, B.C.

Dr. J. Fred Reid, Vancouver, B.C.

Canadian Dental Research Award

On the recommendation of the Council on Dental Materials and Devices, Executive Council approved the awarding of the Canadian Dental Research Award to Dr. C.A.G. McCulloch of Hamilton, Ontario for his paper entitled: "Cell Migration in the Periodontal Ligament of Mice".

The University of Toronto, Department of Oral Biology will receive the Institutional Trophy for 1983.

Office Automation

An additional printer and terminal have been added as part of the word processing center which will extend the electronic processing capability in areas such as communications and education. This fits in with the original proposal of office automation but has only just been recently added as the need was made evident.

Future CDA Conventions Schedule

Plans are well underway for the following Annual Conventions:

1984 - Montreal - April 9-12 - Chairman, Dr. M. Jahjah

1985 - Ottawa - Sept. 29-Oct. 2 - Chairman, Dr. D.J. O'Connor

1984 Interim Board of Governors

In keeping with the tradition of holding a Board of Governors meeting in conjunction with the Annual Convention, where possible, the 1984 Interim meeting of the Board of Governors will be held prior to the Montreal Convention, namely April 8-9, 1984 (Sunday and Monday).

EXECUTIVE

Matters for Information

Attendance at Meetings

Since the March 1983 Board of Governors meeting, the President and/or his designate from the Management Committee have attended the following meetings:

March 16	- ACFD House of Delegates	Cincinnati, Ohio
Apr. 15-16	- New Brunswick Dental Society Annual Meeting	Fredricton, N.B.
Apr. 25-26	- Quality Assurance Round Table Meeting	Chicago, Illinois
Apr. 28-30	- Saskatchewan College Annual Convention	Prince Albert, Sask.
May 14	- Annual Meeting of Newfoundland Dental Association	St. John's, Nfld.
May 16-17	- Ontario Dental Association Annual Meeting	Toronto, Ont.
May 29-30	- Les Journées Dentaire	Montréal, Que.
June 10	- Nova Scotia Dental Association Annual Meeting	Halifax, N.S.
June 12-13	- Alberta Dental Association & Western Provinces Dental Society Joint Meeting	Jasper, Alta.
July 16-20	- Academy of General Dentistry	Toronto, Ont.
July 28-29	- CFDS Graduation Ceremonies	Camp Borden, Ont.
August 29-31	- Second World Congress on Prison Health	Ottawa, Ont.
Sept. 7	- University of Toronto - Welcome to the Profession	Toronto, Ont.
Sept. 22	- Presidents/Chief Executive Officers of Corporate Members Annual Meeting	Vancouver, B.C.

Respectfully submitted

William R. Thompson
Chairman
Executive Council

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

REVENUE:	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984	
Fees	\$1,799,340	\$1,832,235	\$1,855,762	\$2,118,175	I
Advertising & Subscriptions	359,075	413,750	373,781	416,000	
Rental Income	110,556	118,921	116,531	142,003	
Grants	37,669	39,000	39,000	44,000	
Pamphlets	56,911	50,000	60,000	70,000	
Interest	148,881	60,000	60,000	60,000	
Accreditation	17,700	14,600	12,603	14,600	
FDI Rec/Pay	6,515	6,000	6,000	6,000	
Dental Health Month	17,865	22,000	18,823	22,000	
Foreign Exchange	3,289	-	-	-	
TOTAL REVENUE	<u>\$2,557,801</u>	<u>\$2,556,506</u>	<u>\$2,542,500</u>	<u>\$2,892,778</u>	
EXPENDITURES:					
Salaries & Benefits	\$ 515,940	\$ 568,028	\$ 568,028	\$ 595,330	
Journal	409,805	486,058	420,025	467,500	II
General & Administration	229,432	258,400	251,100	272,000	III
Travel & Meetings	292,661	309,795	341,039	395,225	IV
Honoraria & Per Diems	171,984	173,450	179,370	195,825	V
Property Management	234,833	271,200	267,500	283,400	VI
Pamphlets	45,377	50,000	50,000	50,000	
CDA Newsletter	22,862	18,000	18,000	24,000	
Dental Aptitude Program	45,848	43,500	60,000	67,500	VII
Accreditation	27,588	45,000	30,000	40,000	
Dental Health Month	32,366	45,000	45,000	45,000	
Membership Campaign	13,193	25,000	25,000	25,000	
Conferences	32,933	27,500	27,500	29,000	
Student Affairs	15,314	11,800	15,000	23,500	
FDI Admin. & Membership	14,693	20,000	18,000	20,000	
Professional Services	24,790	31,000	31,000	32,000	
Grants/Sponsorship	10,955	11,000	10,000	10,000	
	<u>\$2,140,574</u>	<u>\$2,394,731</u>	<u>\$2,356,562</u>	<u>\$2,575,280</u>	
Unbudgeted Projects	35,684	50,000	50,000	50,000	
	<u>\$2,176,258</u>	<u>\$2,444,731</u>	<u>\$2,406,562</u>	<u>\$2,625,280</u>	
EXCESS OF REVENUE OVER EXPENSES	<u>\$ 381,543</u>	<u>\$ 111,775</u>	<u>\$ 135,938</u>	<u>\$ 267,498</u>	
Special Projects:					
* Dental Awareness	(* Not Approved)			\$ 80,000	
* CDA Certification Program	(* Not Approved)			50,000	
Total against 1984 Budget				<u>\$ 130,000</u>	
EXCESS OF REVENUE AFTER BOARD APPROVAL OF NEW PROJECTS				<u>\$ 137,498</u>	

1982 Actuals & 1983 Budget restated to reflect changes in reporting positions for Professional Services, Grants/Sponsorship and FDI Membership Subscription Expense.

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

AS AT MAY 1, 1983

SCHEDULE I

FEE BREAKDOWN:	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984
Active & Affiliate	\$1,555,899	\$1,585,000	\$1,598,250	\$1,844,325
Corporate	132,823	140,935	136,835	137,050
Associate	10,025	8,500	10,022	10,000
DAT Program	78,352	75,000	86,347	104,000
Student	<u>22,241</u>	<u>22,800</u>	<u>24,308</u>	<u>22,800</u>
TOTAL	<u>\$1,799,340</u>	<u>\$1,832,235</u>	<u>\$1,855,762</u>	<u>\$2,118,175</u>

MEMBERS BY PROVINCE:	1982	To Date 1983	Projected 1984
British Columbia	1,755	1,679	1,775
Alberta	1,128	1,089	1,150
Saskatchewan	335	309	350
Manitoba	439	416	450
Ontario - ODA	3,862	4,030	4,100
- RCDS	4,715	4,763	4,800
Quebec - ACDQ	1,310	1,352*	1,300
- ODQ	2,656	2,400	2,400
New Brunswick	210	219	220
Nova Scotia	313	323	325
Prince Edward Island	43	43*	45
Newfoundland	126	130	135

Increase in 1984 members based on addition of graduates, adjusted for possible foreign students.

Active & Affiliate fees reflects increase in membership to \$225.

Ontario & Quebec membership totals used for projection of Active & Affiliate fees: as at April 22, 1983 - Ontario 2,576
- Quebec 1,171

Variance between Projected '83 Actuals and Budget '83 for Corporate Fees is due to error made when calculating Quebec Corporate Grants.

*Received June, 1983

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

CDA JOURNAL

SCHEDULE II

REVENUE:	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984
Gross Advertising	\$ 344,019	\$ 400,000	\$ 360,000	\$ 400,000
Sale of Reprints	612	1,000	193	1,000
Journal Subscription	<u>14,444</u>	<u>12,750</u>	<u>14,000</u>	<u>15,000</u>
TOTAL REVENUE	<u>\$ 359,075</u>	<u>\$ 413,750</u>	<u>\$ 374,193</u>	<u>\$ 416,000</u>
EXPENSE:				
Agency Commission	\$ 45,900	\$ 55,000	\$ 50,400	\$ 55,500
Sales Commission	5,745	5,933	7,500	8,000
Salaries & Benefits	59,222	75,625	75,625	83,200
Layout	2,097	4,000	2,500	3,450
Printing	225,785	235,000	210,000	228,200
Shipping	11,959	15,000	13,000	16,500
Postage	24,640	44,000	20,000	26,500
Travel	2,276	4,500	4,500	6,000
Translation	11,297	15,000	12,000	13,500
Sundry	6,207	8,000	5,000	5,000
Brokerage	-	500	500	500
Audit - CCAB	1,000	2,500	2,000	2,650
Scientific Editors	6,300	10,000	6,000	7,500
Reprint Expense	378	1,000	1,000	1,000
Telephone	4,984	5,000	5,000	5,000
Bad Debt Expense	<u>2,015</u>	<u>5,000</u>	<u>5,000</u>	<u>5,000</u>
TOTAL EXPENSE	<u>\$ 409,805</u>	<u>\$ 486,058</u>	<u>\$ 420,025</u>	<u>\$ 467,500</u>
EXCESS OF REVENUE OVER EXPENSE	<u>\$ (50,730)</u>	<u>\$ (72,308)</u>	<u>\$ (45,829)</u>	<u>\$ (51,500)</u>

COST PER MEMBER:

1984 cost per CDA paid membership based on May 31, 1983 Journal audit:

Active, Affiliate & Associate	8,281
Student	<u>1,900</u>
Total Member Subscription	<u>10,181</u> ÷ 51,500 = \$5.05

Not included: Life, Past Presidents & Honorary Members; 560

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

GENERAL & ADMINISTRATION SCHEDULE

SCHEDULE III

	Actuals <u>1982</u>	Budget <u>1983</u>	Projected 1983 <u>Actuals</u>	Proposed Budget <u>1984</u>
Office Equipment:				
Rental & Servicing	\$ 25,211	\$ 28,000	\$ 26,500	\$ 28,000
Purchases & Repair	11,300	10,000	10,000	10,000
Insurance	8,176	10,000	9,000	10,000
Office Supplies	19,958	19,800	18,000	20,000
Postage	33,432	36,000	40,000	44,000
Shipping & Delivery	4,549	6,000	2,000	4,000
Telephone & Telegraph	51,635	50,000	50,000	55,000
Translations	8,366	12,000	9,000	10,000
Data Processing	22,177	30,000	30,000	33,000
Printing & Duplicating	20,520	33,000	33,000	36,000
Audit	7,300	8,000	8,000	8,000
Depreciation -				
Furniture & Fixtures	9,168	7,600	7,600	6,000
Personnel Advertising	41	1,000	1,000	1,000
Subscriptions/Clippings	1,758	2,000	2,000	2,000
Miscellaneous	<u>5,841</u>	<u>5,000</u>	<u>5,000</u>	<u>5,000</u>
TOTAL GENERAL & ADMINISTRATION	<u>\$ 229,432</u>	<u>\$ 258,400</u>	<u>\$ 251,100</u>	<u>\$ 272,000</u>

- 1983 Actuals were projected from expenses recorded in first four months of year.
- Total of allotments for Postage/Shipping & Delivery remain the same, \$42,000, adjustments have been made between the expense items to more accurately report the business action.
- Data Processing includes amortizement of hardward purchases, service agreement expense, supplies and general ledger accounting handled out-of-house.

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

TRAVEL & MEETING

SCHEDULE IV

	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984
Executive Council	\$ 42,305	\$ 30,915	\$ 32,707	\$ 35,190
Liaison/Convention	-	7,335	10,363	11,985
Management Committee	30,613	24,510	37,570	40,000
Membership Committee	5,602	9,540	15,000	14,535
Taxation Committee	135	2,500	2,000	2,000
Product Acceptance Comm.	3,344	4,000	5,000	5,780
Editorial Board	3,789	5,000	5,440	5,780
President's Expense	25,729	21,300	21,300	25,000
	<u>\$ 111,517</u>	<u>\$ 105,100</u>	<u>\$ 129,380</u>	<u>\$ 140,270</u>
Council on Education	\$ 11,737	\$ 14,175	\$ 16,425	\$ 17,212
DAT Committee	11,136	14,190	14,064	16,000
Continuing Education Comm.	1,882	3,380	-	12,000
Council on Health Care	16,919	26,600	26,600	28,000
Council on Hosp. services	6,562	8,640	8,000	14,000
Dental Materials & Devices	8,332	12,420	12,420	14,925
Constitution & By-Laws	5,866	3,225	3,225	6,800
Council on Nominations	-	1,000	1,000	1,000
Council on Ethics	-	3,870	-	4,590
Council on Info. Services	4,328	7,740	7,740	9,520
Council on Student Affairs	8,061	12,505	12,505	14,378
Board of Governors	58,249	44,400	57,130	58,650
Pres. & CEOs/Spec. Sections	13,362	13,680	13,680	14,880
	<u>\$ 257,951</u>	<u>\$ 270,925</u>	<u>\$ 302,169</u>	<u>\$ 352,225</u>
Staff Travel	<u>\$ 34,710</u>	<u>\$ 38,870</u>	<u>\$ 38,870</u>	<u>\$ 43,000</u>
	<u><u>\$ 292,661</u></u>	<u><u>\$ 309,795</u></u>	<u><u>\$ 341,039</u></u>	<u><u>\$ 395,225</u></u>

SEE NOTES

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

PER DIEMS

SCHEDULE V

	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984
Executive Council	\$ 47,194	\$ 38,400	\$ 38,360	\$ 38,400
Liaison/Convention	1,950	7,200	12,600	13,175
Management Committee	21,437	27,200	27,200	27,200
Membership Committee	4,313	2,900	6,000	6,300
Taxation Committee	1,350	1,750	1,050	1,050
Product Acceptance Committee	-	500	-	-
Editorial Board	250	2,600	-	-
President's Expense	28,350	20,000	18,000	25,000
	<u>\$ 104,844</u>	<u>\$ 100,550</u>	<u>\$ 103,210</u>	<u>\$ 111,125</u>
Council on Education	\$ 1,700	\$ 2,400	\$ 2,400	\$ 2,400
DAT Committee	1,050	1,200	1,200	1,400
Continuing Education Comm.	-	-	-	-
Council on Health Care	1,800	3,600	3,600	3,600
Sub Committee Action	-	-	-	-
Council on Hosp. Services	2,100	3,600	3,600	3,600
Dental Materials & Devices	450	1,200	1,200	1,800
Constitution & By-Laws	1,375	1,200	1,200	1,800
Council on Nominations	-	400	600	600
Council on Ethics	-	1,200	-	1,200
Council on Info. Services	975	2,400	2,400	2,400
Council on Student Affairs	650	2,400	2,400	2,400
Board of Governors	18,105	21,300	25,560	28,000
	<u>\$ 133,049</u>	<u>\$ 141,450</u>	<u>\$ 147,370</u>	<u>\$ 160,325</u>
Contingency - Spec. Projects				3,500
Honoraria	<u>\$ 38,935</u>	<u>\$ 32,000</u>	<u>\$ 32,000</u>	<u>\$ 32,000</u>
	<u>\$ 171,984</u>	<u>\$ 173,450</u>	<u>\$ 179,370</u>	<u>\$ 195,825</u>

Ongoing monitoring of expense allocations has indicated the following adjustments are required for per diem projections:

Exec. Council	4 x 3 days @ \$3,200 -	\$38,400
- Liaison	10 days @ \$ 350 -	\$ 3,500
- Convention	4.5 days @ \$2,150 -	9,675
TOTAL EXECUTIVE COUNCIL		<u>\$51,575</u>
Board of Governors		
Chairman & Exec. Council	\$3,550 x 2.5 days -	\$ 8,875
Council Chairmen	\$2,250 x 2.5 days -	5,625
EXPENSE PER MEETING		<u>\$14,500</u>

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

PROPERTY MANAGEMENT

SCHEDULE VI

		Actuals	Budget	Projected	Proposed
		1982	1983	1983	Budget
REVENUE:				Actuals	1984
C.Ph.A.	- 5,110 sqft	\$ 46,556	\$ 47,930	\$ 47,930	\$ 47,930
Alcron	- 2,919 "	21,892	23,595	24,708	37,947
CCHA	- 2,664 "	23,310	23,310	23,310	28,027
RCFC	- 918 "	8,492	10,098	10,098	10,098
Clendenning	- 300 "	2,550	2,550	2,662	3,900
Fed. of					
Med. Women	- 125 "	1,375	1,375	1,375	1,625
ODS	- 100 "	900	900	900	900
Parking		3,405	3,500	3,300	4,800
TOTAL REVENUE		\$ 108,480	\$ 113,258	\$ 114,283	\$ 135,227
ADD 5% for					
Escalation Clauses		2,076	5,663	2,248	6,776
TOTAL PROJECTIONS		\$ 110,556	\$ 118,921	\$ 116,531	\$ 142,003
EXPENSES:					
Depreciation		\$ 48,176	\$ 49,800	\$ 49,800	\$ 51,800
Mortgage & Interest		70,352	90,000	85,000	85,000
Realty Tax		39,391	44,000	42,200	48,000
Insurance		3,608	4,400	4,000	4,800
Light, Heat, Water		32,227	40,000	45,000	48,000
Repair &					
Maintenance: Labour		13,061	12,500	12,500	14,100
Security -					
Grounds		7,623	7,000	7,000	7,700
Supplies		2,665	3,500	3,500	4,000
Large Equip.		12,120	15,000	15,000	16,500
Misc.		5,610	3,500	3,500	3,500
TOTAL EXPENSES		\$ 234,833	\$ 269,700	\$ 267,500	\$ 283,400
EXCESS OF EXPENSE		\$ 124,277	\$ 150,779	\$ 150,969	\$ 141,397

CANADIAN DENTAL ASSOCIATION

BUDGET - 1984

DENTAL APTITUDE TESTING

SCHEDULE VII

	Actuals 1982	Budget 1983	Projected 1983 Actuals	Proposed Budget 1984
REVENUE:				
Test Fees	\$ 78,352	\$ 75,000	\$ 86,347	\$ 104,000
DIRECT EXPENSE:				
Printing: Test Supplies	\$ 6,888	\$ 9,500	\$ 13,000	\$ 20,500
Promotion	9,717	3,000	3,000	3,500
New Materials	5,369	2,500	17,000	12,000
Grading/Processing	3,285	8,000	10,000	10,000
Fees for Service	17,581	13,000	10,000	12,000
Shipping	2,847	3,500	3,000	3,500
Validation Research	161	4,000	4,000	6,000
TOTAL	\$ 45,848	\$ 43,500	\$ 60,000	\$ 67,500
EXCESS OF REVENUE OVER DIRECT EXPENSE	\$ 32,504	\$ 31,500	\$ 26,347	\$ 36,500
ADDITIONAL EXPENSE:				
Interview Study Work Shops	\$ 4,451	\$ 14,000	\$ 14,000	\$ 14,500
Travel & Meetings	14,526	14,190	14,000	16,000
TOTAL	\$ 18,977	\$ 28,190	\$ 28,000	\$ 30,500

1984 Revenue based on 1,600 applicants at \$65 each; includes DAT fee @ \$55 plus \$10 preparation package.

Validation Research for 1984 includes computerization and research costs for:

- 1) Interview Study
- 2) Student Questionnaire Analyses
- 3) Applicant/Repeat Study
- 4) Development & Testing of validation materials

Travel & Meetings 1983 for McGill Workshop and retraining sessions.

Travel & Meetings 1984 includes retraining sessions and joint meeting with all participating schools.

CANADIAN DENTAL ASSOCIATION

BUDGET/PROJECTIONS

NOTES

REVENUE:

FEES - See Schedule I, page 2

ADVERTISING & SUBSCRIPTIONS -

Journal Revenue: Based on 1983 Actuals to April 30, 1983 having exceeded 1982 Actuals for same time period by 14%, Gross Advertising Revenue proposed for 1984 includes \$370,000 for Journal Advertising and \$30,000 for Classified Ads.

Subscriptions: Based on Journal Audit figures as at May 26, 1983:

Canadian Subs	107 x \$35 -	\$3,745
USA	" 142 x \$35 -	\$4,970
Foreign	" 163 x \$38 -	\$6,194

RENTAL INCOME - Changes based on renewal of leases at \$13.00 per sq. ft. for:

2,919 sq. ft. (Alcron) Ren. date; Oct 31/83.
300 sq. ft. (Clendenning) Ren. date;
Dec 1/83.
125 sq. ft. (Fed of Med. Women) Ren.
date; Dec 31/83.
2,664 sq. ft. (CCHA) Ren. date; July 31/84.

GRANTS -

1984 amounts estimated as:

\$15,000 NDEB; Accreditation undergrad
and postgrad programs
\$12,000 CFDE; Student Conference grant
\$ 8,500 " ; Student Table Clinic
\$ 8,500 " ; Teaching Conference
\$44,000

PAMPHLETS -

Based on increase of sales. As at May 1, 1983 Revenue recorded at \$24,226 x 3 - \$72,678 and reduced to reflect slowdown of shipments during summer months.

REVENUE: (cont'd)

INTEREST

- Maintained Revenue figure reflects expected stabilization of savings interest for some time with a hoped for upswing during mid 1984.

ACCREDITATION

- Although the initial five year payment program has finished its term the assumption has been taken for a revenue projection that the payment system will rollover for a further five year period, and that the dental faculties will pay the same fees for 1983/84 which is CDA's 1984 revenue from Accreditation.

FDI REC/PAY

- Balance records CDA portion of FDI memberships administered through national headquarters. Approximately 50% is maintained less the cost of foreign exchange. All subscriptions are forwarded to London, England in U.S.\$.

594 memberships were recorded in 1982
592 memberships have been forwarded to
to date, June 14, 1983.

DENTAL
AWARENESS
MATERIALS

- Amount proposed reflects expected cost recovery on dental health kits, posters, etc.

FOREIGN
EXCHANGE

- Not an income item. Maintained for audit purposes as an in/out account for foreign exchange dealings.

CANADIAN DENTAL ASSOCIATION

BUDGET/PROJECTIONS

NOTES

EXPENSE:

SALARIES & BENEFITS - Projections based on present salaries and conditions indicate this item should finish the year under budget, however, no changes are projected as a precaution against unanticipated staff turnover.

JOURNAL - 1983 Projection will come in under budget due to obtaining lower second-class postage rating and changes in Journal presentation, i.e. paper weight change, binding, etc. 1984 Budget reflects an 11% increase over Projected '83, however is approximately 4% lower than approved '83 Budget.

Should a proposal to discontinue forwarding the Journal to non members be considered the net effect to the proposed budget should remain as projected, i.e. a decrease in revenue would be offset by a decrease in cost.

GENERAL & ADMINISTRATION - Based on Four Month Actuals a small decrease in overall expense is projected.

TRAVEL & MEETINGS - 11% increase in Projected Actuals reflects escalating air fare costs and increased activity of members.

Executive Council
Changes:

Executive Liaison expense for attendance at council meetings is included in the projected cost of each council meeting. Formerly, expenses for participation in unbudgeted meetings and convention attendance has been charged through the Executive Council meetings account. In 1983, a new account, Liaison/Convention has been established to more accurately record these activities.

EXPENSE:

TRAVEL & MEETINGS (cont'd)

Membership Committee:	Estimates are based on two called meetings plus the equivalent of one meeting expense to cover committee members' travel expense for campaign activities.
Continuing Education Committee:	1984 Budget based on the expectation of two meetings plus an allocation of funds for seminar speakers.
Council on Hospital Services:	1984 Budget amount includes \$4,000 for a possible Workshop/Accreditation survey.
Council on Student Affairs:	Expense is based on air fare and living allowance for one meeting; living allowance for one day added to annual convention and \$4,400 for travel expense to cover student representation at other meetings.

PROPERTY MANAGEMENT -

Mortgage & Interest:	Projected decrease in 1983 is due to falling interest rates and accelerated decrease of principal amount owing as a result of increase to monthly payment. Mortgage interest is paid on balance of principal each month at the going Bank prime lending rate.
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<u>HONORARIA & PER DIEMS</u>	- Increases projected due to more activity and to more travel time necessary because of change in air line schedules.
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<u>PAMPHLETS</u>	- No change projected on budget amount as anticipated activity can be accommodated within allocated amount.
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<u>COMMUNIQUE</u>	- Budget based on four mailings a year at approximately \$6,000 each; includes postage.
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EXPENSE:

<u>ACCREDITATION</u>	- Decrease projected based on expenses to date and on balance of surveys for year 1983.
<u>NATIONAL DENTAL AWARENESS</u>	- 1984 Expenses include program expenses approved at June, 1983, Information Services Council meeting and on assumed continuation of public health awareness material.
<u>MEMBERSHIP CAMPAIGN</u>	- Ongoing membership promotion expense.
<u>CONFERENCES</u>	- Amount reflects expense necessary to cover Student Conference, Student Table Clinic and Teaching Conference should grants through CFDE fail to materialize.
<u>STUDENT AFFAIRS</u>	- 1983 Budget amount covers shipping, translation, data processing and publication printing expense; other expenses such as receptions and special projects are included under Administration. 1984 Student Affairs Budget includes all expenses for Student Affairs activities.
<u>FDI ADMINISTRATION & MEMBERSHIP</u>	- Covers CDA membership in FDI formerly recorded under Grants & Promotion, and Administration Expense for pass-through membership accounting.
<u>PROFESSIONAL SERVICES</u>	- Formerly included under General & Administration Budget; includes cost of legal and consulting expenses for all programs.
<u>GRANTS/SPONSORSHIP</u>	- Covers CFDE annual grant, CSA dental standards writing program and other sponsorship expense.

REPORT OF THE EDITORIAL BOARD

Members: Dr. A.E. MacLeod, Halifax, Chairman
Dr. J.D.R. Grier, Victoria
Dr. M.D. Klotz, Willowdale
Dr. A.D. Sparrow, Calgary
Mr. H.E. Drouin, Executive Director
Mr. C. Metcalfe, CDA Journal Editor
Mrs. D. Goodwin, Director of Communications

Introduction:

Since the expansion of the Editorial Board took place by authorization of the Board of Governors meeting in September, 1982, the Board has met twice: December /82 and May 13/83. The decisions of the Editorial Board since that time reflect the contributions of the two additional members appointed to the Board, i.e. Dr. Grier of Victoria, B.C. and Dr. Klotz of Willowdale, Ontario. The Editorial Board also welcomes the participation of Mrs. Doris Goodwin, the new Director of Communications.

Readership Survey:

At the December /83 meeting of the Board, a Readership Survey was decided upon and included in the April issue. While the response numerically appears favourable, an interpretation of the results was not available at the time of the May 13 meeting.

Budget:

Board members found the budget very encouraging. Advertising revenue is increasing and the balance of expenses to income is being maintained within very reasonable parameters. It has reached the point where the Journal is costing CDA members only about \$5.50 per year. The Editor and Advertising Manager continue their efforts to strengthen this position.

Editorials:

The Board decision at its December meeting is now being implemented. Essentially, the decision was to have editorials written on topics of special importance to the dental profession in Canada and further that members of the Editorial Board would take the lead in providing such editorials.

Circulation:

At its May meeting, the Editorial Board noted that approximately 4,000 Journals were distributed free to non-members of the Canadian Dental Association.

...continued

Editorial Board Report - page 2

Circulation - continued

The Editorial Board shares the view of the Membership Committee that membership should be maximized across the country by all means possible and decided that the risk of losing some advertisers and advertising revenue with a lower circulation figure -- to members only -- should be taken in order to make the approach of membership drives more successful and rational.

Accordingly, the Editorial Board recommends:

WHEREAS the Board of Governors of the CDA, at its meeting of March 5-6, 1983, recommended and approved a resolution authorizing a charge for membership services utilized by non-members who are eligible for membership; and

WHEREAS the receipt of the Journal of CDA is an essential membership service;

THAT the delivery of the Journal to non-members without charge be discontinued.

ANNEX I

Executive Council disagrees.

NOTE: Submitted to Board for action -- see Executive Council Report.

Expanded Role for Editor

It was explained to the Board that developments and measures to streamline production of the Journal, being planned and implemented, would allow the Editor and his staff more time for research and development of articles of direct interest to the dental profession. Board members agreed that this would be desirable.

Respectfully submitted,

A.E. MacLeod, D.D.S.
Chairman
Editorial Board

ADOPTION OF REPORT

The Board accepts the report of the Editorial Board with appreciation.

ANNEX I

RESTRICTION OF JOURNAL CIRCULATION TO MEMBERS ONLY

Removal of non (CDA) members would result in a reduction of our total circulation figure from the present 15,718 to 11,828.

This would drop below the total circulation figure of our closest competitor, Oral Health - which is 13,345.

When reduced circulation was introduced in 1977, the reduction in readership resulted in loss of interest in the CDA Journal on the part of advertisers, and revenue dropped by \$52,000 in the first year.

Initially, the 2,000 additional readers of Oral Health may attract some of our advertisers to their fold.

Present circumstances are considerably different than those prevailing in 1977.

Previously the Journal was not an impressive publication, without its present prestige in the field, nor was it the professional calibre publication offering all the services it provides today. That will continue.

There is no particular reason why the quality will suffer. The Journal may, however, need a bit more financial support temporarily while the membership builds and the circulation is restored as a result of a sustained and more effective membership drive.

Also in the area of finances, a reduction of 4,000 in our press run would result in a \$1,300 reduction in our printing bill each month (mostly for paper stock).

A sustained drive on the part of the advertising manager to gain new clients is also anticipated to counteract to some extent any loss of interest on the part of existing clients.

Thus far this year, the advertising drive - with many leads for new clients being identified by the Executive Director and the Editor, has been bearing fruit in a highly encouraging manner, in spite of a generally ill national economy. There is no reason to believe that level of achievement cannot continue.

We believe the cut-off decision may well create enough incentive to recover as many as half of this 4,000 circulation within the first year, and probably most by the second year. Any suffering sustained, would therefore be of relatively short duration.

Clarence Metcalfe, Editor
(on behalf of the Editorial Board)

CANADIAN DENTAL ASSOCIATION
JOURNAL REVENUE / EXPENSE ANALYSIS

	<u>1978</u>	<u>1979</u>	<u>1980</u>	<u>1981</u>	<u>1982</u>
Revenue	\$188,230	\$197,307	\$285,120	\$315,312	\$359,075
% of Increase over previous year	(9%)	5%	45%	11%	14%
Expenses	\$216,476	\$265,647	\$334,594	\$376,993	\$409,805
% of Increase over previous year	(3%)	23%	26%	13%	9%
% of Expense covered by Revenue	87%	74%	85%	84%	88%
Deficit for Year	\$ 28,246	\$ 68,340	\$ 49,474	\$ 61,681	\$ 50,730
Paid Memberships (1)		9,124	9,269	8,827	9,353
Cost per Paid Member		\$ 7.49	\$ 5.34	\$ 6.99	\$ 5.42

(1) Paid Memberships as recorded by September Journal Audits:

Active	Not Available	7,261	7,611	7,130	7,632
Affiliate		235	50	141	134
Associate		84	73	116	125
Student		<u>1,544</u>	<u>1,535</u>	<u>1,440</u>	<u>1,462</u>
TOTAL		<u>9,124</u>	<u>9,269</u>	<u>8,827</u>	<u>9,353</u>

REPORT OF THE
AD HOC COMMITTEE ON HOSPITAL SERVICES

Members: Dr. Donald E. Williams, Chairman
Dr. Ralph Crawford
Dr. Bradley Holmes
Mr. Hubert Drouin

The Ad Hoc Committee appointed to study the matter of Accreditation has met three times, and included in their meetings a visit to Montreal where interviews were held with Dr. Mervin Gornitsky, Chairman of the Council on Hospital Services, and Dr. Kenneth Bentley, Chairman of the Council on Education. Outlined below is the Committee's perception of the problem and possible solution.

History of the Problem

It would appear that the problems lie in two main areas:

1. the word "should" or "shall" in relation to approval of internships and residencies in hospital service programs
2. who, or which Council, (Hospital Services or Education) accredits intern and residency programs.

Chronologically these events have occurred:

1979 - February: Council on Hospital Services revoked 1970 T 57(f) and placed...

"In regard to dental undergraduate, graduate and post-graduate programs, internships in general dentistry and dental hygiene education programs, no such program "shall" (quotation marks the author's) be considered

for accreditation unless the dental service of the hospital in which the program partly or wholly takes place, has been approved by CDA".

1979 - June: Council on Education proposed a resolution in conflict with Council on Hospital Services February 1979 meeting

"Council on Education be permitted to approve internship and residency programs in hospitals which do not have dental services approved by CDA but which form part of a graduate, post-graduate program in an area of specialization recognized by the CDA."

1979 - October: Board of Governors disagreed with both February '79 and June '79 proposals....

"Since Council on Education and Council on Hospital Services liaison report did not make recommendations in their reports, and since recommendations have been made by each of the Councils, which would appear in some instances to be in conflict.....therefore.....arrange a meeting of the two Chairmen and Management Committee and the Director of Accreditation and prepare recommendations for the Board..."

1980 - March 7: Liaison Committee....Drs. Main, Yeo, Bentley, Chatwin drafted a resolution for Councils' consideration to replace 1970 T57(f)...

.../3

"No internship or residency shall be considered for approval unless the dental service(s) of the hospital in which the internship or residency program is mounted has been approved by CDA"

1981 - June: ACFD House of Delegates passed a resolution....

"Whereas intern and residency programs, currently accredited by Council on Hospital Services are clearly identified as education, ACFD requests that CDA consider that their accreditation be undertaken by the Council on Education."

1982 - May: Council on Education met, considered the ACFD resolution and made the following motion....

"That as existing CDA guidelines on Internship and Residency programs in General Dentistry specifically state that these are educational programs, they are considered by Council to be post-graduate programs, and as such, should fall under the purview of the Council on Education for accreditation purposes."

1982 - July: Executive Council, in consideration of Council on Education's May 1982 motion, recommended....

"....that the Council on Hospital Services be phased out and that the present activities of the Council on Hospital Services be undertaken by the Council on Education, beginning after the 1983 Annual Meeting of the Board of Governors."

1982 - September: Executive Council's recommendation was discussed at the Board of Governors and two separate issues were identified....

1. Whether the Council on Education or the Council on Hospital Services accredits educational programs in hospitals
2. Whether the Council on Hospital Services should be discontinued.

A Motion to Defer, #82.76, was accepted

"That the action on this matter be deferred and that an Ad Hoc Committee be struck to study the issue and report back to the Board of Governors."

In its deliberations the Ad Hoc Committee studied many documents, amongst which were: the Minutes of both Councils over a period of 12 years; the ADA "Commission on Accreditation"; the "Thordarson Report" for the 1982 Secretaries Conference; Dr. V. Chatwin's Accreditation Progress Report of August 1982, and numerous other letters, reports and documents. Throughout, the Committee has maintained two thoughts foremost....

1. the most important: the "sacredness" of accreditation and the most important role played by the CDA. The national dental organization must maintain, and be perceived by all of Canada to maintain, and be the guardian of standards in all dentistry.

2. that until a final solution is reached the "status quo" of the accreditation process must remain. All programs, schedules and objectives must be fulfilled. It is not possible to re-structure at a rapid rate and no program, hospital or dental service accreditation should be delayed.

RECOMMENDATION

The recommendation of the Ad Hoc Committee is that both the Council on Education and the Council on Hospital Services be phased out and two new Councils be created....

1. The Council on Accreditation whose purpose it would be to accredit all programs;
2. The Council on Educational Services whose purpose would include responsibility for Dental Admissions, Continuing Education, Seminars other related areas;
3. That this be implemented by the September, 1984 Board of Governors meeting.

.../6

COUNCIL ON ACCREDITATION

The Council on Accreditation shall consist of sixteen members (one of whom is the chairman) and in electing the membership of the Council the Board of Governors will assure that representation is constituted as follows:

1. Three members shall be full-time active members of the Faculties of Canadian Dental Schools
2. Four members shall not be full-time Dental Faculty members
3. Two members shall be associated with hospitals where dental services are provided

The Chairman shall be appointed by the Executive Council from Groups 1, 2 or 3

4. (a) one member from nomination by the Council on Student Affairs
(b) two members from nominations by Registrars
(c) one member from nominations by National Dental Examining Board of Canada
(d) one member from nominations by Association of Canadian Faculties of Dentistry
(e) one member from nominations by Royal College of Dentists of Canada
5. One lay person selected by the Executive Council

.../7

- 7 -

The Canadian Forces Dental Services, Canadian Dental Hygienists Association, and the Canadian Dental Assistants Association shall be invited to send one representative each to participate in a non-voting capacity in the Council on Accreditation.

The Council on Accreditation shall have the power to appoint committees, subcommittees and surveyors as it shall deem expedient.

.../8

It shall be the duty of the Council on Accreditation:

- (i) to give study to all matters relating to dental accreditation and education
- (ii) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to Dental Accreditation.
- (iii) to evaluate the various forms of dental accreditation and to recommend revisions to the Board of Governors when necessary
- (iv) to accredit undergraduate, postgraduate and graduate programs in dentistry, programs in dental hygiene, and dental assisting courses, and periodically review such accreditation in accordance with requirements and standards approved by the Board of Governors.
- (v) to accredit dental internships, residencies and hospital dental services in accordance with requirements and standards approved by the Board of Governors.
- (vi) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to specialization in dentistry to programs leading to specialist qualifications.
- (vii) to recommend to the Board of Governors methods of assisting corporate members and/or provincial licensing bodies with respect to dental accreditation when requested.

- (viii) to assist in maintaining a high standard of dental services in Canadian Hospitals.
- (ix) to examine and report on the Provincial Acts governing provision of dental services in hospitals.

The Council on Accreditation shall be composed of at least three separate committees for the purpose of accrediting programs and services.

1. Committee on Undergraduate, Graduate and Post-graduate Education. The Committee shall be composed of the following five members from Council on Accreditation:
 - i) a full-time active member of one of the faculties of Canadian Dental Schools
 - ii) a member who is not a full-time member of a Dental Faculty
 - iii) a Registrar member from one of the provincial licensing bodies
 - iv) two members representing either the Council on Student Affairs, National Dental Examining Board of Canada, Association of Canadian Faculties of Dentistry, Royal College of Dentists of Canada

The Chairman of the Committee shall be appointed by the Council Chairman and must be a member of the Council.

It shall be the duty of this Committee to deal with all matters pertaining to undergraduate, graduate and post graduate accreditation in so far as the policies of the Council on Accreditation direct.

2. Committee on Hospital and Institutional Dental Services:

The Committee shall be composed of the following five members:

- i) two members from Council who are associated with and who represent hospitals where dental services are provided
- ii) two additional members having special familiarization and knowledge with hospital dental services. Some consideration should be given to regional representation.
- iii) one dental faculty member with experience in hospital dental services.

The chairman of the Committee shall be appointed by the Council Chairman and must be a member of the Council.

It shall be the duty of the Committee to deal with all matters pertaining to hospital dental services in accordance with the policies of the Council on Accreditation.

3. Committee on Auxiliary Services: The Committee shall be

composed of the following five members:

- i) a chairman appointed by the Council chairman and must be a member of the Council.
- ii) a member from the Canadian Dental Assistants Association
- iii) a member from the Canadian Dental Hygienists Association
- iv) two other members having particular interests in dental auxiliary services.

.../11

- 11 -

It shall be the duty of this Committee to deal with all matters pertaining to Dental Auxiliary Services in accordance with the policies of the Council on Accreditation.

.../12

COUNCIL ON EDUCATIONAL SERVICES

The Council on Educational Services shall consist of at least five members, one of whom is the Chairman. One member shall be actively involved in dental admission programs and a second who is actively involved in continuing education programs.

The Council shall consist of at least two Committees:

1. The Committee on Dental Admissions shall consist of four members one of whom shall be Chairman. Chairman of the committee shall be appointed by the Council Chairman and must be a member of the Committee.

It shall be the duty of the Committee to deal with all matters relating to dental program admissions.

2. The Committee on Continuing Education shall consist of four members one of whom shall be Chairman. Chairman of the Committee shall be appointed by the Council Chairman and must be a member of the Committee.

It shall be the duty of the Council on Educational Services:

- i) to study all matters relating to dental admissions
- ii) to organize, regulate and conduct all dental admissions testing programs.
- iii) to study all matters relating to continuing dental education

- 13 -

- iv) to encourage, initiate and conduct appropriate continuing education programs for the profession.

Respectfully submitted

Donald E. Williams, D.D.S.
Chairman

Executive Council Approved
July 8-9, 1983.

NOTES TO DELIBERATION

1. The two new Councils and their Committees have been set up so that the Chairman of Council is appointed by the President/Executive Council and Committee Chairmen are selected by the Council Chairmen.
2. The Council on Accreditation is similar to the former Council on Education in that it includes broad representation from all facets of dentistry concerned with education, accreditation, licensure and standards.
3. The Committee structure (numbers and representation) is such that they can capably deal with their committee responsibilities and can duly report back to the Council at large. No particular Committee's numbers or make up is such that their particular views can "override" that of the Council.
4. Each of the Committees of both Councils have certain specified numbers and assigned membership but where unspecified it is understood the Chairman making the appointments will appoint personages of particular ability and with some consideration to regional representation.

.../ii

5. Two broad aspects of education have been addressed, accreditation and services. However, it is conceivable to understand that other "educational matters" not directly under the purview of accreditation and services may arise. Both new councils should be structured that further standing committees or ad hoc committees may be added as required.
6. In the past, the Council on Education's Chairman attempted to be present at the meetings of Committee Nos. 1, 2 and 3. However, under the new structure this need not be mandatory, although the Council Chairman is an ex-officio member of each Committee, and, if required and convenient, he may attend Committee deliberations.
7. If the directors of hospitals providing dental services have an organization they could be asked to name or nominate members to the Council on Accreditation.
8. Consideration must be given to the timing of on-site accreditation. One survey per city whereby faculty programs, hospital services, etc., could all be accomplished in one visit would not only be much more convenient to the institutions concerned but also considerably more cost effective. Consideration

also must be given to the frequency of hospital on-site surveys ... once every five years rather than the present three. It is expected that there would be open communication between the three different accreditation committees in order that maximum efficiency and effectiveness of the accreditation process is attained with minimum expense and disruption to the institutions involved.

9. Dates of implementation of the new Councils must be considered. The timing is quite convenient for change and restructuring as the Council on Hospital Services is changing dramatically (4 out of 5 members coming off) and the Director of Accreditation is retiring.
10. It is assumed that the staff person who is Director of Educational Services and Director of Accreditation shall have responsibilities directly related to the respective Councils.

COUNCIL ON ACCREDITATION

Chairman to be selected from this group (who are actually Board of Governors "approved")	1	FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	2	FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	3	FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	4	NOT FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	5	NOT FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	6	NOT FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	7	NOT FULL TIME ACTIVE MEMBER OF CANADIAN DENTAL SCHOOLS
	8	ASSOCIATES AT HOSPITALS WHERE DENTAL SERVICES ARE PROVIDED
	9	ASSOCIATES AT HOSPITALS WHERE DENTAL SERVICES ARE PROVIDED
	10	NOMINEE FROM COUNCIL ON STUDENT AFFAIRS
	11	NOMINEE FROM NDEB
	12	NOMINEE FROM ACFD
	13	NOMINEE FROM RCD(C)
	14	NOMINEE FROM REGISTRARS
	15	NOMINEE FROM REGISTRARS
	16	LAY PERSON SELECTED BY EXECUTIVE COUNCIL
		TOTAL 16 MEMBERS

COMMITTEES OF THE COUNCIL ON ACCREDITATION

1. COMMITTEE ON UNDERGRADUATE, GRADUATE AND POST-GRADUATE EDUCATION

From Council	1	FULL TIME ACTIVE FACULTY MEMBER
	2	NOT FULL TIME ACTIVE FACULTY MEMBER
	3	REGISTRAR REPRESENTATIVE
	4	TWO OF STUDENT, NDEB, ACFD, RCD(C) REPRESENTATIVES

2. COMMITTEE ON HOSPITALS AND INSTITUTIONS

From Council	1	ASSOCIATE FROM HOSPITAL WHERE DENTAL SERVICES PROVIDED
	2	ASSOCIATE FROM HOSPITAL WHERE DENTAL SERVICES PROVIDED
May not be from Council	3	TWO ADDITIONAL OF THOSE FAMILIAR WITH HOSPITAL
	4	DENTAL SERVICES (AND REGIONAL REPRESENTATION??)
	5	ONE DENTAL FACULTY MEMBER WITH EXPERTISE IN HOSPITAL DENTAL SERVICE

CHAIRMAN TO BE EITHER 1 OR 2

3. COMMITTEE ON AUXILIARY SERVICES

May not be from Council	1	CHAIRMAN FROM THE COUNCIL
	2	MEMBER - CANADIAN DENTAL HYGIENISTS ASSOCIATION
	3	MEMBER - CANADIAN DENTAL ASSISTANTS ASSOCIATION
	4	TWO OTHER WITH PARTICULAR INTEREST AND
	5	KNOWLEDGE ON AUXILIARY SERVICES

COUNCIL ON EDUCATIONAL SERVICES

- 1 MEMBER ACTIVELY INVOLVED IN DENTAL ADMISSIONS
- 2 MEMBER ACTIVELY INVOLVED IN DENTAL CONTINUING EDUCATION
- 3 } AT LEAST THREE OTHERS WITH INTERESTS,
- 4 } ACTIVITIES AND EXPERTISE IN
- 5 } EDUCATIONAL SERVICES
- 6 } OTHERS AS REQUIRED??
- 7 }

CHAIRMAN FROM EITHER 1 OR 2

COMMITTEE ON DENTAL ADMISSIONS

- | | | | |
|-------------------------|----|--|--|
| From Council | -- | <div style="border: 1px solid black; padding: 2px; display: inline-block;">1</div> | ACTIVE IN DENTAL ADMISSIONS FROM COUNCIL |
| May not be from Council | -- | <div style="border: 1px solid black; padding: 2px; display: inline-block;">2
3
4</div> | ALL APPOINTED MEMBERS OF PARTICULAR INTEREST AND EXPERTISE |

COMMITTEE ON CONTINUING EDUCATION

- | | | | |
|-------------------------|----|--|--|
| From Council | -- | <div style="border: 1px solid black; padding: 2px; display: inline-block;">1</div> | ACTIVE IN CONTINUING EDUCATION |
| May not be from Council | -- | <div style="border: 1px solid black; padding: 2px; display: inline-block;">2
3
4</div> | ALL APPOINTED MEMBERS OF PARTICULAR INTEREST AND EXPERTISE |

REPORT OF THE MEMBERSHIP COMMITTEE

Members	Dr. D.E. Williams, Moncton, Chairman Dr. B.W. Holmes, Kenora Dr. R. Hurley, Montreal Dr. L. Tomkins, Windsor Dr. J. Laporte, Québec
CDA Staff	Mr. H. Drouin, Executive Director Mrs. D. Goodwin, Director of Communications Mrs. J. Scrimger, Business Manager Miss L. Teteruck, Director of Education Dr. W.R. Thompson, (in-coming chairman)

This Committee met in December and July during the past year.

President Dr. W.R. Thompson, who will be chairman of this Committee during the active part of the 1984 campaign was able to attend these meetings.

Due to a decreasing trend in the number of dentists joining CDA from the two voluntary provinces the Committee was expanded and its level of activity increased.

1. 1983 Membership Campaign

The 1983 membership campaign was conducted in four stages:

- 1) direct-mail solicitation
- 2) telephone blitz by volunteers
- 3) telephone solicitation by telemarketing firm
- 4) direct-mail solicitation (concurrent with telephone solicitation)

The following is an outline of how each of these stages was conducted.

a) Direct Mail Solicitation

An invoice for 1983 membership fees was mailed to all dentists in Ontario and Québec on November 3, 1982. A letter from Dr. Thompson urging dentists to renew their membership in the CDA accompanied the invoice. A follow-up invoice was mailed in mid-December. In mid-February, a third invoice was sent along with a covering letter encouraging the individual dentist to participate in organized dentistry by supporting the CDA. The letter further explained that a CDA member would be calling to explain CDA programs and recent activities.

These mailings are important to the total campaign. Increased membership subscriptions have been recorded after each mailing. The greatest response comes just prior to year-end and in January of the new year.

b) Telephone Blitz by Volunteers

Two membership workshops were conducted on February 12, 1983 - the third annual workshop in Toronto and the first in Montréal. The purpose of the workshops was to provide volunteer telephone canvassers with information on the programs and activities of the CDA in order that they could be totally informed about the CDA and be better able to answer questions put to them by non-members during the telephone canvass. An example of some of the material provided to canvassers is included in appendix 1. As a result of the campaign it was determined that 92 dentists said they would join the CDA and 52 said they would consider joining. Staff were able to identify that this portion of the membership campaign netted 44 members.

Appendix 1

c) Telephone Solicitation by Telemarketing Firm

The volunteer phone campaign is essential to our membership drive. It provides the personal touch from the Association. However, until enough volunteers can be recruited to contact all the dentists who are non-members, other methods have to be tried. A recommendation was made to Executive Council at its May meeting, and Council agreed that the CDA hire a professional telephone marketing company to conduct a pilot membership telemarketing program.

Appendix 2

The telemarketing company was assigned the task of developing and testing an outbound telemarketing program for 448 dentists. The calling was targeted to 162 dentists in Ontario and 286 dentists in Québec who had failed to respond to the direct mail solicitation and who also were not contacted during the CDA telephone blitz.

In Ontario

1. 87 dentists were contacted
2. 20 said they would join
3. 16 said they would reconsider

In Québec

1. 136 dentists were contacted
2. 30 said they would join
3. 44 said they would reconsider

To those individuals reporting that they would join, the CDA mailed a thank-you letter and an invoice. Also included was a kit containing information on the structure of CDA, sample health education pamphlets, information on dental health films, information on the library and back issues of the CDA Communiqué.

Appendix 3

The same kit was included in a mailing to those individuals reporting that they were reconsidering. A covering letter outlined member services.

Dr. W.R. Thompson is to be congratulated for the emphasis he placed on this extremely important activity during his year as President. He identified to the Committee, the importance to the Membership drive of the CDA President attending the joint meeting of the four Toronto component Societies held in the fall of the year, as well as, the Winter Clinic of the Toronto Academy of Dentistry. It is also important for the President to attend the joint meeting of the Greater Montréal Dental Societies.

The results of the campaign to date are attached as appendix 4. Results of the 1983 campaign have been very encouraging in Ontario. It is difficult to identify the reasons why Québec dentists have not reacted similarly to CDA membership promotions activities. Hopefully the 1984 volunteer phone blitz will be more productive in Québec.

Appendix 4

The trend in decreasing membership numbers appears to have stopped and a system to retain our voluntary members, regain former members and attract those dentists new and old who have never joined the CDA is being devised.

2. To treat all student members equally the following motion was recommended to Executive Council:

That the definition of Student Member be changed to accommodate full-time post-graduate students and that the CDA By-laws be amended accordingly.

Concerning Article V, Section 7 of the CDA By-laws:

Student Members

Any undergraduate student in an accredited dental school in Canada who has been recommended for membership by the Council on Student Affairs, or, any graduate dentist otherwise eligible for an Active or Affiliate membership who has gone directly from an undergraduate program to a full academic year or more of advanced study in a university, or in a hospital program approved by the Association, shall be granted Student Membership classification upon payment of the appropriate fee. All new graduates who have been student members in good standing of the Canadian Dental Association for the prescribed period shall be granted the status of an Active Member of the Canadian Dental Association from the date of graduation until December 31st of the year of graduation.

The new By-law should read:

"...who is pursuing a full-time academic year or more ...".

3. CDA/ODA Membership Campaign

The proposed joint membership campaign with the Ontario Dental Association was not conducted this year. Hopefully with the cooperation of the CDA and ODA Management Committees this campaign will be organized later this year and implemented in 1985.

4. 1984 Campaign

The 1984 campaign has been planned following the same basic course of action as last year with several refinements. The second mailing in December will be divided into member 1983 and non member divisions. The dentist who was a non member in 1983 will receive a note saying he/she will be called in January to discuss membership. In mid-January, a telemarketing firm will be given the names of all dentists who were non-members and requested to conduct a telephone solicitation. In early February, a CDA membership workshop will be held again at which time volunteers will be provided with information on the CDA and again will be prepared for a telephone solicitation to reach non-members who were not contacted by the telemarketing firm, plus 1983 members who have not joined. Identification of target groups last year will continue to be an integral part of the campaign. Immediately prior to the meeting of this Committee in July, three staff members, L. Teteruck, Director of Education, J. Scrimger, Business Manager and D. Goodwin, Director of Communications attended a workshop which the "objective was to study strategies of membership". This experience should serve the Committee well in conducting the campaign this year.

Appendix 5

5. Membership Deadline Date

It was identified to the Committee that there is no official date when members should be notified that their names would be struck from the membership list for non-payment of dues. This notification could be in the form of a letter or telephone call or both. Member services would cease to be available free-of-charge to the dentists after this notification. The following motion was recommended to Executive Council:

That March 31 be accepted as the official date on which all individuals who have not paid their membership dues will be designated non-members. All member services will thereafter not be available to those individuals on a complementary basis.

6. CDA Life and Associate Members

Life and Associate Members were approved by Executive Council in May and July and their names are attached as appendix 6.

Appendix 6

Respectfully submitted,

Dr. D.E. Williams,
Chairman,
Membership Committee

ADOPTION OF REPORT

The Board accepts the report of the Membership Committee with appreciation.



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

PROCEDURES FOR CDA MEMBERSHIP CANVASS

1. Solicit several CDA members in your area to assist in the telephone canvass of non-members.
2. Distribute membership kits and the names of non-members for whom the canvassers will be responsible.
3. Request that each volunteer canvasser call the non-members and explain the purpose and activities of the CDA.
4. Each canvasser is to complete the non-member status forms and return them to CDA in the self-addressed envelopes no later than March 10, 1983. We recognize that this deadline date may pose a problem for some. If such is the case please call Dr. Brad Holmes (B - 807-468-5581; R - 807-468-6194) and a mutually convenient date will be decided upon.
5. If long distance telephone charges are incurred please submit an expense claim form to the CDA.

INTRODUCTION

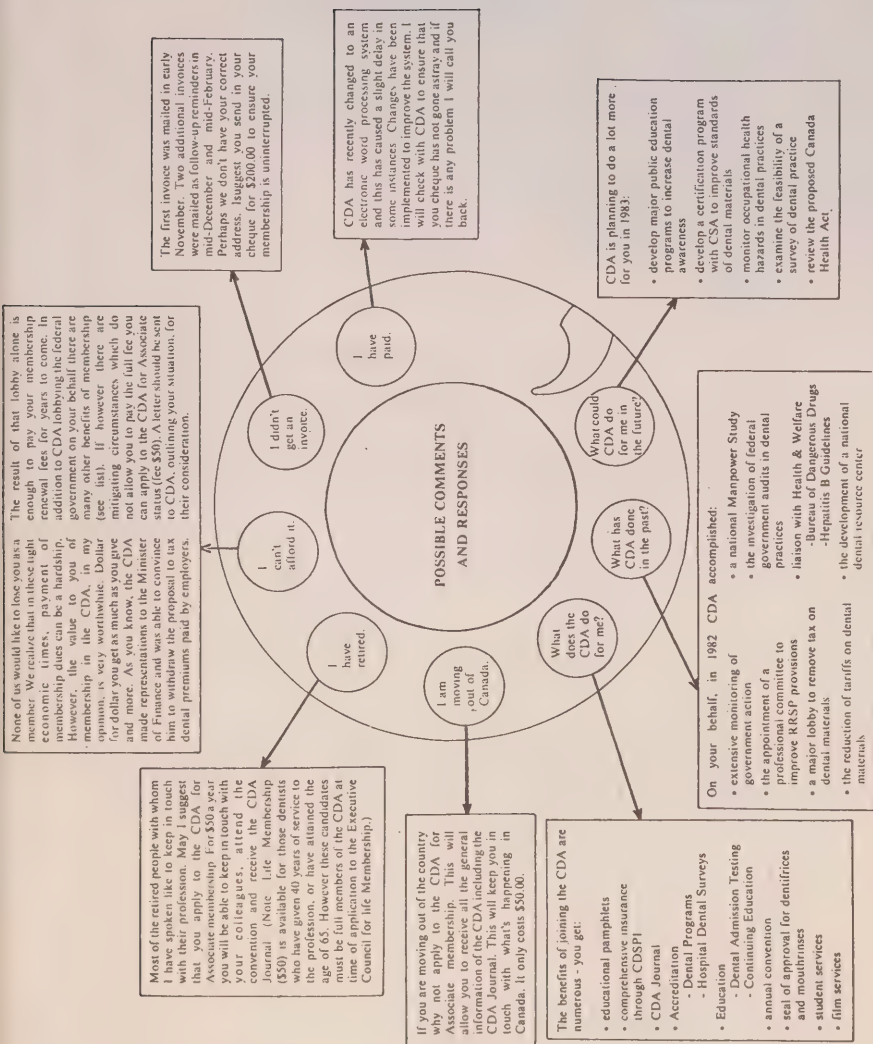
(Prospective member's name), my name is Dr. _____

I'm calling on behalf of the Canadian Dental Association.

Observations

1. You have been a member in the past and we are concerned that you have not yet joined the CDA for 1983. We, the current members, would like to count on you and your support as a member. Can we expect that your membership application will be sent?
2. I notice that you were a member in 1981 but did not join the CDA last year. Is there some reason why you decided not to join? Have circumstances changed since then? We need your membership.

SEE REVERSE FOR SAMPLE QUESTIONS AND ANSWERS.



Hull Colvey Limited

THE DIRECT MARKETING GROUP

May 19, 1983

Mrs. Doris Goodwin
Director of Communications
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

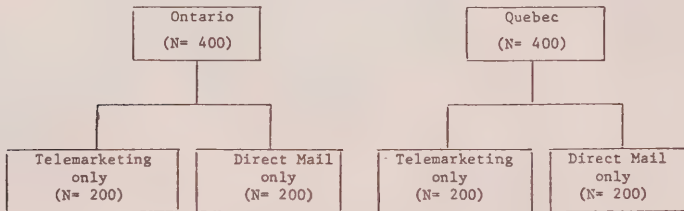
Dear Doris:

Re: Spring '83 C.D.A. Telemarketing Program

The purpose of this letter is to confirm the details of the telemarketing program that Hull Colvey Limited could undertake for the Canadian Dental Association.

As I understand the background, the Canadian Dental Association has conducted a series of direct mail letters to Ontario and Quebec dentists (as well as the balance of Canada) to encourage membership in the C.D.A. At this juncture there are approximately 800 dentists who have not responded.

The 800 non-responders (400 Ontario; 400 Quebec) will now be contacted as follows:



.../2

Hull Colvey Limited

.../2

Therefore, the Hull Colvey telemarketing assignment is to:

- consult with the C.D.A. and develop a telemarketing strategy
- develop the script
- contact the 200 Ontario and 200 Quebec dentists (at home if possible) from the list provided by the C.D.A. and encourage membership on the C.D.A. All telecommunicators calling Quebec will be bilingual.
- provide a detailed written report at the end of the program

It may also be necessary to conduct telephone look-up to obtain the home numbers if the data is not available from the C.D.A.

The hourly costs of the project are:

- | | |
|------------------------------|-----------|
| • local dialing | \$25/hr |
| • balance of Ontario dialing | \$35/hr |
| • Quebec dialing | \$40/hr |
| • telephone look-up | \$8.50/hr |
| • consulting | \$100/hr |
| • creative development | \$50/hr |

Based on 7 contacts per hour, the estimated overall costs would be:

	<u>7 Contacts/Hr</u>	<u>10 Contacts/Hr</u>
• 125 local contacts = $\frac{125}{7} \times \$25/\text{hr}$ =	\$450	\$313
• 75 bal. of Ont. contacts = $\frac{75}{7} \times \$35/\text{hr}$ =	385	263
• 200 Quebec contacts = $\frac{200}{7} \times \$40/\text{hr}$ =	1160	800
• consulting: 3 hours x \$100/hr =	300	300
• creative development/testing: 5 hours x \$50/hr =	250	250
TOTAL	\$2,545	\$1,926

If the contact level can be increased to 10 per hour the price would drop to \$1,926.

.../3

Hull Colvey Limited

.../3

All out-of-pocket costs (e.g. courier, photocopying, etc.) are billed net.

Doris, I'm convinced that telemarketing can be a very important and profitable addition to the C.D.A. communications mix and we look forward to hearing from you regarding the start date:

Regards,



John W. Arnold
Vice-President

JWA:kl

c.c. David Shaw



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

date

Dr.
.....
.....
.....

Dear Dr.:

I was very pleased to learn that you are presently thinking about joining the Canadian Dental Association.

To help make your decision a positive one I have enclosed a kit which contains a paper outlining the objectives and structure of the CDA, sample public education pamphlets which you may wish to order for your office, a list of the dental health films available to you, the last two issues of the CDA Communiqué.

I realize you were informed by telephone of the benefits of joining the CDA, however I feel it is necessary to emphasize again that non-members will be charged an administrative fee on goods and services provided by the CDA. For instance:

1. If you wish to purchase educational pamphlets you will have to pay substantially more than a CDA member, i.e. pamphlets selling for \$10/100 to members will cost you \$15/100.
2. Last year CDA installed a Medline system in the library. This is a computerized literature search service. The Medline contains over 3,000 biomedical journals indexed for Index Medicus plus special lists including the Index to Dental Literature. If as a non-member, you request a literature search you will be charged \$25.

..... /2

CDA Convention • VANCOUVER • Congrès de l'ADC

25-28 sept 1983



4. As a non-member you will not be eligible to receive the CDA Communique. This newsletter, which is now published quarterly, is designed to inform you of various efforts of the CDA including the current CDA lobby against Revenue Canada's efforts to change audit procedures of management companies.
5. When you attend the CDA National Convention you will not be eligible for a reduced registration fee.

There are numerous other member services. I would be very pleased to discuss these, as well as the services outlined, with you and to learn why you have not joined the CDA. Your comments would be directed to the Membership Committee for their consideration. Please feel free to call me collect at 613 - 523 - 1770 at your convenience.

Sincerely yours,

Hubert Drouin,
Executive Director



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

Dr.
.....
.....
.....

Dear Dr.:

We were delighted to learn of your intention to become a member of the Canadian Dental Association.

Enclosed is an invoice which we would ask you to complete and return to us with your remittance. A receipt and membership card will then be issued.

Also for your information I have enclosed a paper outlining the objectives and structure of the CDA; sample public education pamphlets which you may wish to order for your office; a list of dental health films available to you and back issues of the CDA Communique.

We look forward to providing you with the best service possible and assisting you in any way we can. Please contact us at any time should you have questions about member services.

Sincerely yours,

Hubert Drouin,
Executive Director

1983 MEMBERSHIP
AS AT AUGUST 4, 1983

<u>ONTARIO</u>	<u>1983 TOTAL MEMBERS</u>	<u>1983 LICENSED MEMBERS</u>	<u>1982 TOTAL MEMBERS</u>
Active & Affiliate	2,612	2,612	2,414
Associate	85	50	81
Life & Past President	261	114	262
New Graduates	<u>180</u>	<u>170</u>	<u>158</u>
TOTAL	3,138	2,946	2,915
Licensed dentists in Ontario	4,763	4,763	4,715
CDA "Total Members" as a %	66%		62%
CDA "Licensed Members" as a %		62%	
<u>QUEBEC</u>			
Active & Affiliate	1,216	1,216	1,239
Associate	50	37	38
Life & Past President	92	60	91
New Graduates	<u>129</u>	<u>129 (1)</u>	<u>76</u>
TOTAL	1,487	1,442	1,444
Licensed dentists in Québec	2,700	2,700	2,700
CDA "Total Members" as a %	55%		53%
CDA "Licensed Members" as a %		53%	

(1) Québec new graduates assumed licensed as ODQ member list not received until November.

MEMBERSHIP PLUS IS THE KEY TO ASSOCIATION SUCCESS

*Those who can retain
their present members, and recruit
more, will survive the recession.*

MEMBERSHIP PLUS

is a workshop whose objective is to study strategies of membership ... management, promotion, records, renewal and retention ... within the context of a membership system which is adaptable to electronic data processing.

MANAGEMENT

Mission, goals, planning and the association image as they relate to membership.

PROMOTION

Finding prospects
Personalizing the approaches
Telephone campaigns
Training "Sales Staff"

RECEPTION

From prospect to Member
Identification
Welcome
Orientation
Involvement

RECORDS AND SYSTEMS

Developing the member information base appropriate to eventual computerization ... what, how, when and where.
Increasing usefulness while reducing costs.

RENEWAL

New billing ideas, including faster turn around, cycle billing and discounts.

RETENTION

Keeping them in by keeping them happy
Relaters
Rewards

CONSULTATION

Bring your own problems and concerns for group discussion and opinions by the workshop leaders.

WORKSHOP LEADERS

ROBERT KELLY, C.A.E.
HERB PERRY, C.A.E.

Herb Perry and Bob Kelly are two of Canada's most respected experts in association management.

They are both Certified Association Executives (C.A.E.) and each has his own consulting and association service practice.

One of Bob Kelly's specialties is cost effective information management systems which are adaptable to micro computer use.

Herb Perry is an acknowledged expert on building membership and working with volunteers.

For these two MEMBERSHIP PLUS workshops they will combine their skills for your benefit.

APPENDIX 5

MEMBERSHIP PLUS REGISTRATION FOR

(Name)

(Information)

(Address)

.....

TORONTO, JUNE 22, 1983

(9300 A.N. Park Plaza Hotel)..... ()

OTTAWA, JULY 6, 1983

(900 A.N. Talisman Hotel)..... ()

CHEQUE (payable to Association Central)

for \$10 ENCLOSED

RETURN TO

Association Central, Sec. 414

151 Blaine West, Toronto, Ont. M5S 1R1

No refunds after one week prior to date of workshop; substitutions are allowed.

Cancellations more than one week prior to date of workshop are subject to \$25 service charge.

Workshops may be cancelled without notice, in which case full registration fee is refunded.

For further information call
(416) 923-4235



WHO SHOULD ATTEND?

Association Executives

Membership Recruiters

Member Services Managers

Those Who Recruit Volunteers

EXECUTIVES and STAFF from

Professions

Trade Associations

Charities

Concern Groups

Churches

EVERYONE STRIVING for ...

better membership recruitment, retention, records and services

*One New Membership Idea
Will Repay The
\$130 Registration Fee*

MEMBERSHIP PLUS

A FULL DAY WORKSHOP
COVERING ...

Management (x)

Promotion (x)

Reception (x)

Records (x)

Renewal (x)

Retention (x)

June 22, 1983
Park Plaza Hotel
Toronto, Ontario

July 6, 1983
Talisman Hotel
Ottawa, Ontario



CANADIAN DENTAL ASSOCIATION

The following Dentists have applied for and qualify to become CDA Life Members:

<u>NAME</u>	<u>PROVINCE</u>	<u>YEAR OF GRADUATION</u>	<u>DATE OF BIRTH</u>
Dr. F.L. Pierce	B.C.	1953	1917
Dr. Z.L. Altraks	ONT.	1937	1913
Dr. A.W. Bazerman	QUE.	1943	1917
Dr. C. Delaney	QUE.	1946	1914
Dr. J.S. Gruman	QUE.	1943	1918
Dr. R.O. Brett	SASK.	1942	1918
Dr. C.Y. Godin	QUE.	1933	1904
Dr. A.W. Soklofske	ALTA.	1950	1918
Dr. W.T. Waite	SASK.	1942	1918
Dr. O.F. Wright	B.C.	1942	1919
Dr. F.D. Charman	N.S.	1949	1917

The following Dentists have applied for Associate Member status:

<u>NAME</u>	<u>PROVINCE</u>
Dr. H.S. Crosby	N.S.
Dr. Ginette Barbeau	QUE.
Dr. Benoit Lafontaine	QUE.
Dr. J.A. Lauziere	QUE.
Dr. R.E. Booker	ONT.
Dr. A.E. Galldin	ONT.
Dr. M. MacLoughlin	ONT.
Dr. J.R. Wiles	ONT.
Dr. A. Rehlane	B.C.

MINUTES

MEETING OF COMMITTEE OF SALARIED DENTISTS

HELD AT FOUR SEASONS HOTEL

OTTAWA, ONTARIO

3 MARCH 1983.

DELEGATES:

Chairman: BGen J.N. Wright

Members: Dr. J.W. Niedermayer
Dr. R.K. Ryan
Dean A. Schwartz

Secretary: LCol H.S. Wood

Group Representation:

Federal Salaried Dentists	- B.Gen Wright
Non-Salaried Private Practitioners	- Dr. Niedermayer
Provincial Salaried Dentists	- Dr. Ryan
Institutional Salaried Dentists	- Dr. Schwartz

INTRODUCTORY REMARKS

1. The meeting was opened by the chairman at 0900 hrs on 03 March 1983. Members of the committee were welcomed as was LCol Hal Wood who acted as recording secretary.
2. General Wright stated that the meeting was brought about as a result of the previous Ad Hoc meeting on salaried dentists which was held on 7 May 1982. The aim of the current meeting was to delineate the concerns of salaried dentists insofar as the extent of services provided to them by the Canadian Dental Association and to make recommendations to the Executive Council of the Canadian Dental Association on the topic.
3. The specific items to be discussed were identified as those submitted in letters by the chairman on January 6, 1983 and by Dr. J. Niedermayer on January 24th, 1983. In addition, the concerns expressed by Dr. Goldberg of the Government Dentists of Saskatchewan were to be reviewed.
4. Specific points for discussion were tabled and the meeting considered each topic in order.

REQUIREMENT FOR A NATIONAL ASSOCIATION OF SALARIED DENTISTS

5. The discussion noted that certain salaried dentists have frequently indicated that they did not feel they were being served by CDA. It was noted that only Ontario and Quebec dentists have the option of not belonging to CDA. It was further noted that many Ontario salaried dentists believe there should be a lower fee for salaried dentists in the CDA. The basis of the opinion appears to be that such a fee is granted by the Ontario Dental Association.

The lower fee is reported to have significantly increased numbers of salaried dentists in the ODA.

6. The observation was made that salaried dentists were often unaware of the services provided by their national body and it was expressed that the CDA should be encouraged to convey to salaried dentists the benefits derived from CDA membership.

7. It was noted by the chairman that the September 1982 Board of Governors Meeting has indicated support for a "Canadian Association of Salaried Dentists." If such an organization were to be formed its relationship to the CDA was discussed. In an attempt to determine the requirement for a national association of salaried dentists the following areas in which it was expected that CDA could support salaried dentists were discussed:

- taxation benefits with reference to Continuing Education and Convention expenses;
- Insurance and investment topics;
- Journal and convention content.

8. The point raised as to whether there should be a focal point in the CDA where the concerns of salaried dentists could be presented, instead of a new organization.

9. It is the opinion of the committee that:

- a. The concerns of the salaried dentists have already been defined;
- b. The formation of another national group was not necessary and such action would only serve to contribute to the proliferation of dental organization in Canada.

- c. The concerns of salaried dentists must be addressed and that there must be one focal point within the existing CDA organization to receive the concerns.

Recommendation: That the CDA should disseminate information to members indicating the benefits and services offered by CDA to salaried dentist membership. It is further recommended that this be accomplished through an open letter by the President of the CDA published in the CDA Journal.

Recommendation: It is recommended that a formal national salaried dentists organization NOT be formed, but, it is acknowledged that salaried dentists do have legitimate concerns which must be conveyed to the CDA.

Executive Council agrees.

A MECHANISM WITHIN CDA TO ADDRESS SALARIED DENTISTS CONCERNS

10. It is considered that there should be a designated focal point within the CDA to which the concerns of salaried dentists may be presented. It was agreed that a committee of 4 or 5 persons could serve as the avenue to receive the subject concerns, and that the appointments to such a committee should be by the Executive Council of the CDA.

Recommendation: It is recommended that the members of the "committee on salaried dentists" be as follows:

- a. *one representative from each of two of the provincial associations of salaried dentists; and*
- b. *one representative of the Association of Canadian Faculties of Dentistry;*
- c. *one representative of Federal Salaried Dentists;*
- d. *one representative from non-salaried private practitioners who is not from either province represented at a. above, and who is preferably a current member of the Board of Governors.*

Recommendation: It is recommended the "committee of salaried dentists" be formed as a standing committee of the CDA executive council.

Executive Council agrees and terms of reference will be prepared by Management Committee.

N.B. Terms of Reference were accepted at the Executive Council meeting of 7/8/83 as presented by Management Committee. (appended)

SALARIED DENTIST DEFINITION

Recommendation: It is recommended that salaried dentists be defined as those dentists who are employed by municipal, provincial or Federal agencies (including universities and colleges) to the extent that at least 80% of their time is devoted to a salaried position.

Executive Council agrees, with the addition in line 3 of: "(including universities and colleges and recognized provincial or federal dental associations)".

TAXATION BENEFITS

11. Taxation considerations for dentists insofar as attendance at Conventions and on Continuing Education courses relates to the INCOME TAX ACT. The act applies to all persons in Canada and the applicable sections are NOT limited to dentists, professionals or any specific group. It is as a result of this income tax act that self-employed dentists are able to claim expenses whereas salaried dentists cannot. The rationale of this policy is that when a licence or membership in an organization is required by a salaried person, the funding for that requirement should also be provided by the employer.

Recommendation: It is recommended that initiative be taken by the CDA taxation committee in an attempt to gain taxation benefits for salaried dentists comparable to those now enjoyed by self-employed dentists.

Executive Council agrees

Recommendation: It is recommended that CDA should encourage inclusion of such benefits in negotiated contracts for salaried dentists.

Executive Council agrees in principle and suggests that, in those provinces where there are established Continuing Education requirements for licensure, that the terms of employment should include such benefits in negotiating contracts.

Recommendation: It is recommended that guidelines for minimum annual requirements for continuing education be developed by the CDA (both courses and conventions) and that the standards be made available to organizations employing dentists on salary in order to suggest expected employment criteria (and benefits).

Executive Council disagrees. This is not mandatory in all provinces and requirements are subject to provincial jurisdiction.

THE CDA JOURNAL/THE CDA CONVENTION

12. The Ad Hoc committee meeting report of 7th May 1982 stated that there was insufficient material in the CDA Journal applicable to salaried dentists. It was considered by members of this meeting that the source of the articles for salaried dentists must be from salaried dentists themselves, therefore to increase journal content would require more participation by the concerned group.

Recommendation: It is recommended that the Editor of the CDA Journal and the Chairman of the CDA convention attempt to include items of interest to salaried dentists.

Executive Council agrees and will request input from this sector for Journal articles.

SALARY NEGOTIATION ASSISTANCE

13. There is a problem for salaried dentists to obtain pertinent information on salaries. It was considered that it would be easier for the CDA to gather data on salaries from the various provinces or provincial associations than for each salaried group to act independently in procuring information.

Recommendation: It is recommended that the Executive Director of the CDA obtain annually, information on salary scales of the various salaried dentist groups in Canada for the purposes

of retention in a data bank and for the data to be made available for use of salaried dentist groups on request.

Executive Council agrees.

SASKATCHEWAN DENTAL PROGRAM

14. Dr. Goldberg of the Government Dentists of Saskatchewan, in his capacity as a representative member on the CDA Ad Hoc committee on Salaried Dentists submitted a paper on the topic of the Saskatchewan dental therapist program. The theme of the submission was the lack of recognition of the dental therapists program by the CDA.

15. The committee was also made aware that dental treatment provided by the Saskatchewan program was not included in the R K House report. The resolution of this topic was considered to be beyond the scope of this committee and the following recommendation was made.

Recommendation: It is recommended that the CDA develop and produce a position statement on the employment of dental therapists such as are employed in the Saskatchewan Dental Program.

Executive Council disagrees because CDA has no control over programs for groups such as dental therapists, denturists, dental mechanics and others and does not accredit these programs.

CDA FEE FOR SALARIED DENTISTS MEMBERSHIP

16. It was noted that 8 of the 10 provinces automatically require CDA membership as a part of provincial licensure, with only Ontario and Quebec providing the latitude for voluntary CDA membership. In addition it was pointed out that those dentists, who in addition to their salaried positions, were also self employed as a private practitioner were able to receive taxation benefits identical to any

self-employed dentist. In those cases in which the terms of employment state that it is essential to hold a licence to practice (and if the fees are not paid by the employer) then the licence fee paid becomes a tax benefit. It would appear that the entitlement is also applicable for CDA Fees in Ontario or Quebec (i.e. the CDA membership fee would qualify as a Tax deduction if it were included as a requirement for employment in the terms of reference of employment.

17. It was considered that at present the number of salaried dentists belonging to the CDA in the provinces with voluntary membership does not differ significantly from the provincial membership in the CDA generally. The committee was however, unable to obtain information to verify this opinion. The conclusions that followed were:

- a. A lowered fee for membership in CDA for salaried dentists would increase membership in the CDA;
- b. Any action would of necessity have to take place on a national basis; thus affecting (adversely) the present 100% membership in 8 of 10 provinces;
- c. The total income to CDA would be reduced with a reduced fee for salaried dentists even though CDA membership of salaried dentists would increase; and
- d. An administrative burden would be created both for provincial associations and for the CDA if lesser fees were developed for salaried dentists.

18. It is the opinion of the committee that emphasis should be placed on improved communication and services rather than reduced fees.

Recommendation: It is recommended that the CDA consider the above factors to determine whether the potential increased membership of salaried dentists outweighs the probable loss in income which would follow a decrease in fees for salaried dentists.

Executive Council studied the pertinent factors and considers that emphasis should be placed on improved communication and services rather than reduced fees.

PORTABILITY AND RETENTION OF PROVINCIAL LICENCE

19. Salaried dentists often move between provinces. If on moving the dentist desires to retain the privilege of relicencing at a future time in his original province, there should be a mechanism to permit such action. In some provinces an associate membership at a nominal annual fee serves the purpose.

Recommendation: It is recommended that CDA promote a means such as associate membership in all provinces, by which a dentist once licenced in the province, can retain the right to again procure a licence in that province. (Subject of course to such limitations as conduct and continuing education requirements).

Recommendation: The committee also recognized the concern of salaried dentists for portability of licenses and it recommended that CDA through the corporate bodies promote acceptance of the National Dental Examining Board qualifications on a National basis.

Executive Council agrees in principle, recognizing that licensing is a provincial prerogative.

STATUS OF NON-DENTIST ACADEMICS

20. A discussion took place as to the ability of non dentist academics such as Biomaterials Scientists to serve on CDA committees as a member or chairman. In addition the topic of whether non members were eligible for per diem allowances for such service was queried. It was considered that the topic could not adequately be covered at this meeting.

REPORT TO EXECUTIVE COUNCIL

21. To provide more complete information to the Executive Council on the discussions and concerns of this meeting the following recommendation was developed.

Recommendation: It is recommended that either the chairman or the other Board of Governors representative at this meeting of salaried dentists be requested to attend the Executive Council meeting which will consider the above minutes and proceedings for the purpose of providing further background if required.

N.B.: The Chairman of the Committee attended the Executive Council meeting of 7/8/83 and presented this report.

22. In closing the meeting it was reiterated that there was an urgent requirement for CDA to communicate with the salaried dentists and to make them aware of the areas and functions in which CDA provides support for them.

23. The meeting adjourned at 12:53 hrs.

H.S. Wood LCol
Secretary

J.N. Wright BGen
Chairman

ADOPTION OF REPORT

The Board accepted the report of the Committee on Salaried Dentists with appreciation.

COMMITTEE ON SALARIED DENTISTS

The following Terms of Reference were developed by the Management Committee and approved by Executive Council - July 8-9, 1983.

I. Structure

- a) one representative of federal salaried dentists;
- b) one representative from each of any two provincial salaried dentists' associations;
- c) one representative of the Association of Canadian Faculties of Dentistry;
- d) one self-employed private dental practitioner - preferably a current member of the CDA Board of Governors and not from a province represented in (b).

Appointments to the Committee shall be made annually by the Executive Council and the Chairman of the Committee shall be named by the President.

II. Meetings

- a) one meeting annually at the CDA;
- b) if additional meetings are required, authorization by Executive Council is necessary;
- c) the standing policy regarding CDA funding of meetings of Committees will apply.

III. Responsibilities

- a) to provide a forum for discussion of common interests and concerns of salaried dentists in Canada;
- b) to review and report on items referred to the Committee by the Executive Council;
- c) to report annually to the Executive Council on Committee's activities and recommendations.

Executive Council
July 8-9, 1983.

PRODUCT ACCEPTANCE COMMITTEE

Members: Dr. W.B. Chapple, Ontario - Chairman
Dr. R.Y. Barolet, Québec
Dr. G. Nikiforuk, Ontario
Dr. R. Roydhouse, British Columbia
Dr. W.C. Sturtridge, Ontario
Dr. J. Speck, Ontario

Committee Meetings

1. The Product Acceptance Committee has met twice in 1983, February 18 and June 8.

Seal of Recognition

2. Two applications for renewal of contracts were received and accepted by the Committee. They are as follows:
 1. Beecham Canada Inc. - Aqua-Fresh toothpaste
 2. Lever Detergents Limited - Aim toothpaste

Warner-Lambert Canada Inc., will renew their contract effective August 1, 1983.

Two new applications for the Seal of Recognition were received and after verification of both clinical and scientific data were accepted. They are as follows:

1. Certalab Inc. - Pressdent toothpaste
2. Colgate Palmolive Canada - Dentagard toothpaste

Advertising

3. Concerns were received from both the profession and the general public regarding claims made in recent advertisements that certain toothpastes are capable of reversing tooth decay. These advertisements and new copy were received and the Committee prepared the following two principles relating to fluoride advertisements and tooth decay as a guideline for manufacturers of dentifrice:
 1. Early (initial) stages of tooth decay:
 - a) is evidenced by loss of minerals
 - b) appears on the surface with subsurface demineralization
 2. Fluoride reverses the above early stages of decay only. It cannot reverse cavities or reverse the whole process. It cannot heal cavities.

These principles were distributed to all holders of the Seal of Recognition.

TAXATION COMMITTEE REPORT

Members: Dr. Robert N. Hicks, Chairman
Dr. William R. Thompson
Dr. Donald E. Williams

1. Professional Management Company Audits by Revenue Canada

The Taxation Committee is continuing its opposition to the present methods being utilized by Revenue Canada in their determination of which Management Company expenses are eligible for a profit mark-up. In the past, most professional Management Companies have used a formula whereby up to 15% profit margin has been applied to all Management Company expenses in order to reach a reasonable profit for the company. This method of calculation has been received by Revenue Canada in past years and been accepted following audits of professional Management Companies. However, the policy of Revenue Canada is to accept the 15% mark-up on only a limited number of expenses.

During the initial meetings with Revenue Canada, the Taxation Committee Chairman presented the Canadian Dental Association's reasons why the new method of calculation in recent audits is not reasonable. Examples were presented by the CDA which showed "arms-length" (i.e. non-dentist or dentist family-owned) Management Companies would, in fact, charge more than the amount being claimed as profit by dentists or dentist family-owned companies. Revenue Canada requested verification of these "arms-length" formulas used to calculate cost of providing management services to dental practices. Unfortunately, after months of attempting to obtain verification of these facts, the Taxation Committee was unable to secure written support from any of its sources. It appears to be "human nature" that nobody will voluntarily present the fact of their business affairs to Revenue Canada!

The Committee has recently presented to Revenue Canada the reason why our sources are reluctant to confirm in writing their business practices. As Chairman, I believe Revenue Canada has accepted our reasons and has acknowledged the sincerity and diligence of our efforts to answer their request.

In recent conversations, Revenue Canada informs us that they are moving our discussions on the issue from their Avoidance Division to their Technical Interpretations Division. It is premature to offer comment on whether this is a lateral shift in negotiations or whether we are getting closer to a group that is able to respond to our request. As a personal comment, it has always concerned me that this issue was being treated as a form of tax avoidance. It is CDA's position that Revenue Canada is not "interpreting" the existing tax law correctly, and therefore I hope that this new group will receive our criticisms of their interpretation and work towards a constructive conclusion. The next meeting is planned for the first week in July.

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2. Pre-Tax Pension Contributions for the Self-Employed

I am pleased to report that the Joint Professional Committee on Pensions has overcome its temporary functional problems and is now back on track. They are preparing a significant brief on increasing the opportunities for the self-employed in Canada to adequately provide for their retirement needs.

The Federal Government has established a Parliamentary Task Force to study pensions. The CDA created Joint Professional Committee has been provided an opportunity to present a brief to this Task Force in September.

3. Definition of Personal Service Corporations

In a recent amendment to the Income Tax Act, a definition of "Personal Service Corporation" was created. If a company is defined as such a corporation, the small business or professional management corporation tax rate will not apply. Instead the personal service corporation will be required to utilize the full personal tax rate formula.

It is the concern of the CDA and its advisers that the definition is so broad that it well may be used to include professional management corporations. Two letters have been sent by the CDA to the Minister of Finance and two very different answers have been received in return. The Taxation Committee is continuing its attempts to clarify this matter and will report to the membership when clear direction is obtained.

Respectfully submitted,



Robert N. Hicks, D.D.S.
Chairman

ADOPTION OF REPORT

The Board accepts the report of the Taxation Committee with thanks.

TAXATION COMMITTEE REPORT

Addendum 1 - Sept. 1983

CDA Taxation Committee Meeting with Revenue Canada

July 8, 1983

Re: Professional Management Company Audits

The CDA's presentation included the following points:

1. Revenue Canada's recent method of calculating an annual profit for a Professional Management Company does not produce a "reasonable" return relative to the work performed or the responsibility involved by the company. Their method of calculation also does not produce a "fair market" return when compared with reported "arm's length" management company returns for the same services. The CDA Taxation Committee presented data showing:
 - a) an average Canadian dental practice pays a management fee which includes approximately a 14% profit mark-up to a "non-arm's length" management company.
 - b) An "arm's-length" management company would charge approximately a 17% profit mark-up on the same services provided to the average dental practice example provided in item (a) above.
 - c) Revenue Canada is presently allowing less than a 4% profit mark-up on the same services in the example provided in item (a) above.
2. The CDA Taxation Committee re-emphasized their concern that Revenue Canada has not informed professional practices nor their accounting/legal advisers of their new method of calculating profit mark-ups. The Committee re-stated the fact that dental practices which have been paying a 15% profit mark-up on all services provided by management companies have been doing so with honest belief that they were following the law and Revenue Canada's policy and interpretation of the law. Many professional practices were audited in the years prior to 1980 and were never challenged on the 15% profit mark-up principle.

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TAXATION COMMITTEE REPORT

Addendum 1 - Continued

- 2 -

Until recently, Revenue Canada had consistently denied that there had ever been a change in their policy in this matter. However, in a recent letter to a Canadian dentist, the present Minister of National Revenue states that "as a result of a review of many cases, guidelines were issued in 1980 to our auditors. Undoubtedly the issuing of these audit guidelines resulted in many service corporation arrangements being looked at more carefully and it may well be, that arrangements that our auditors may have once thought acceptable are now being questioned." Also, at the most recent meeting, Revenue Canada officials stated that guidelines were issued to auditors in August, 1981 which reflect the current policy on reasonable charges.

3. The CDA Taxation Committee identified that the Interpretation Bulletin relating to Corporations Used by Practicing Members of Professions (IT-189) states that "the deduction of the amount paid to the corporation by the practice of the particular professional is acceptable provided that the charges for the premises and services are reasonable in relation to the amount someone else would pay in a free market for the same facilities." We pointed out that the bulletin does not state that only certain services would be eligible for a reasonable profit mark-up which is Revenue Canada's present policy. Interpretation Bulletins are the basis on which taxpayers and their advisers plan their business affairs so that they can comply with complicated laws.

Revenue Canada indicated that a revised IT-189 Bulletin is being prepared to primarily respond to the new legislation relating to "personal service corporations". We were told that this Bulletin would not include provisions dealing with "reasonable expenses" relating to professional management companies in order that the present Revenue Canada auditors' guidelines for management company audits would not be in conflict with the Bulletin. Again, the CDA argued that this procedure of changing an Interpretation Bulletin after guidelines have been implemented was not proper nor in the best interest of the taxpayers.

.../3

TAXATION COMMITTEE REPORT

Addendum 1 - Continued

- 3 -

In addition, it was pointed out that with no mention of acceptable profit mark-up on reasonable expenses, the taxpayer was left with no information regarding Revenue Canada's policy.

4. Strong opposition was presented to Revenue Canada's position that para-dental staff costs were not eligible for management company profit mark-ups. The Department's position is that para-dental staff can only perform their duties under the supervision of a dentist and therefore they are actually an employee of the dentist and not of the management company. The CDA Taxation Committee presented examples where individuals who require supervision by law to perform their services and are employees of company A or are independent contractors are hired out to a professional or to company B to work in a supervised activity. In these instances, the fee charged for the use of these individuals are a deductible expense by the professional or by company B. The same rules should apply to professionals purchasing these services from management companies.

At the conclusion of the meeting, it was the opinion of the Taxation Committee Chairman that the Revenue Canada official was receptive to most of our presentation. On areas where we disagreed, both parties agreed to provide additional information for our next meeting which should take place shortly after the summer months.

Revenue Canada indicated that a legal practice is challenging the Department's policy of "reasonable" management company charges to professionals. Apparently, a solo law practice is presenting a case in the federal court in the Spring of 1984 (approximately). From all early indications, this case appears to be a good example which is closely related to dental practices' use of management companies. A decision declaring the 15% profit mark-up on all expenses to be "reasonable" would do much to help solidify this formula in law. We still trust that Revenue Canada will see the "reasonableness" of our presentation and will make some acceptable changes to their policy and guidelines prior to this case coming to trial.

Respectfully submitted,


Robert N. Hicks, D.D.S., M.S.
Chairman, Taxation Committee

TAXATION COMMITTEE REPORT

Addendum 2 - Sept. 1983

Update: Pre-Tax Pension Contributions for the Self-Employed

The Joint Professional Committee established by the CDA has progressed to the stage where a letter has been sent to the Minister of Finance. This letter identifies that the Canadian Dental Association, the Canadian Medical Association, the Canadian Bar Association and the Canadian Institute of Chartered Accountants are concerned that the present Registered Retirement Savings Plans are acutely inadequate to provide even a marginally satisfactory retirement income for most self-employed Canadians. In this letter, our Committee asks for an opportunity to meet with the Minister in order to offer some realistic long-term approaches and some moderate immediate increases in the deduction limits in this plan to help alleviate a long-standing problem.

In addition, we are offering to work with officials in the Ministry of Finance in evaluating pension and retirement program alternatives for the self-employed. We will offer concepts and approaches which we feel will assist the Government in achieving some of its key social objectives through registered plans.

The Federal Government has established a Parliamentary Task Force on Pension Reform. The Joint Committee has been told that it may present a brief at a public hearing in Montreal in mid-October and the brief is currently being prepared.

Respectfully submitted,



Robert N. Hicks, D.D.S., M.S.
Chairman, Taxation Committee

SUBCOMMITTEE ON DENTAL TREATMENT
FOR INDIAN AND INUIT PEOPLE IN CANADA

Preamble

Since Canada's birth 116 years ago with the adoption of the B.N.A. Act, and under the present Charter of Rights, the responsibility for the health of the Indian and Inuit peoples has fallen under the purview of the Federal Government. Presently it is the Medical Services Branch of Health and Welfare Canada that oversees the dental needs of 325,000 Indians and Inuits.

There have been different systems and philosophies of tending to dental needs down through the years, depending upon the economics of the time and the availability of manpower. Not too many years ago, under healthier economics, monetary resources were greater than the manpower supply and it was mainly the "basic" dental requirements that were treated. Today a different picture is seen; there are more dentists available, there are more requests for complicated, intricate, expensive treatment plans, but there are less monies available to treat all requested needs.

Health and Welfare Canada, recognizing the problems noted above, continues to maintain its dual responsibility - that of providing high quality dental treatment on the one hand and being cognizant of obtaining the best value of the taxpayer's dollar on the other hand. Thus, Health and Welfare has approached the CDA with the requests that a cooperative effort be put forth whereby the government and the profession may embark together with a common purpose, to establish first, as soon as possible, a Dental Review Committee and secondly, in the near future, an outline of acceptable available dental services for Indian and Inuit peoples.

.../2

Subcommittee on Dental Treatment for Indian & Inuit People....cont'd

Introduction

The role of the Dental Review Committee would be to give an informed recommendation regarding complicated treatments. Presently, treatment plans beyond "basic" dental requirements are forwarded to Regional Dental Officers for permission to proceed. In many of these cases, for example: orthodontics, major restorative/prosthetic treatment, involved periodontic treatment, etc., the Regional Dental Officer does not feel confident in reaching a suitable decision and thus the need for a Review Committee to assist and deliberate on the treatment plans in order to mutually benefit all concerned.

To this date there has not been a specific Outline of Dental Services which the government and the profession should be making available to the Indian and Inuit population. It is Health and Welfare's request that the C.D.A. assist in establishing such an Outline of Services, considering the given circumstances under which government has to operate.

To this end a meeting was held on January 21, 1983, attended by Dr. Robert Hicks, Dr. Bill Bedford and Dr. Bill Thompson. It was their suggestion that a subcommittee be appointed: 2 members from the Council on Health Care, the Executive Liaison and Dr. Bill Bedford, and the said Committee to deliberate and make recommendations to Executive Council concerning....

- a) Whether to accept or reject Dr. Bedford's proposal (of October 26, 1982) and reasons for the specific decision.
- b) Method of implementing a favourable decision for Dr. Bedford's proposal including terms of reference for the initial study Committee.

The Subcommittee (Dr. Howard Horsman, Chairman; Dr. Bill Bedford, Dr. Ken Skinner, Dr. Keith Hamilton and Dr. Ralph Crawford) subsequently met in Ottawa on Wednesday, April 12, 1983.

.../3

Subcommittee on Dental Treatment for Indian & Inuit People...cont'd

It was the unanimous decision of the subcommittee that since the Government had approached C.D.A. with a sense of cooperation and since the requests lent themselves well to a mutual understanding, that all possible effort be fostered to enhance relationships between the two national bodies toward a common goal -- optimal dental health for Canada's citizens.

RECOMMENDATION #1

A Review Committee be established to assist Health and Welfare's Regional Dental Officers arrive at an informed recommendation regarding complicated, complex treatment plans considered to be well outside of the norm of the usual "basic" dental requirements. The terms of reference to be as follows:

1. Complex treatment plans first be placed with the Regional Dental Officer who would either accept or reject the proposal. In such a case where rejection was noted, the treating dentist would be given the option of placing the proposed case before the Review Committee whose decision would be final.
2. The Review Committee to be selected by the C.D.A. Executive Council from a pool of resource persons in consultation and with input from Corporate Bodies, Licensing Authorities and the Association of Canadian Faculties of Dentistry.
3. Any one particular Review Committee shall consist of:
 - a) at least two specialists in the particular discipline being considered;
 - b) one general practitioner;
 - c) Senior Consultant, Dentistry, representing Medical Services.
4. The Executive Director of C.D.A. shall act as coordinator of the Review Committee.
5. The Review Committee shall meet at the call of the coordinator on the advice of the Senior Consultant, Dentistry, and the call shall be based on need.

.../4

Subcommittee on Dental Treatment for Indian & Inuit People...cont'd

RECOMMENDATION #1 - continued

6. Per Diems for the (3) dental professionals to be set at \$350 per day, paid by Medical Services.
7. Medical Services will pay for transportation, accommodation and meals as per Treasury Board directives.
8. The meetings to be held at C.D.A. offices in Ottawa.

RECOMMENDATION #2

It is recommended that the Council on Health Care appoint at least three dentists who would act as consultants to assist the Department of Health and Welfare in its deliberations to develop an Outline of Dental Services which would be available to the Indian and Inuit population. The suggested number is three but could be expanded as deemed necessary.

The call of the meetings, per diems, expenses, etc. would be similar to those outlined under Recommendation #1 re: Review Committee.

Approved: Council on Health Care - April /83
Executive Council - May /83

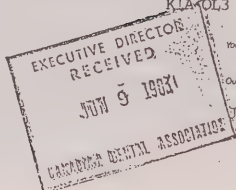


Health and Welfare
Canada

Santé et Bien-être social
Canada

Room 1908,
Jeanne Mance Bldg.,
Tunney's Pasture,
OTTAWA, Ontario,
K1A 0L3

APPENDIX I



Your file Votre référence

Our file Notre référence

June 7, 1983

Mr. Hubert Drouin,
Executive Director,
Canadian Dental Association,
1815 Alta Vista Drive,
OTTAWA, Ontario.
K1G 3Y6

Dear Hubert:

Further to your letter of May 27, 1983, the following is the information that you requested.

Agreements in Effect:

- 1) Ontario Region with University of Toronto for services in Sioux Lookout and Moose Factory areas.
- 2) Ontario Region with Ontario Dental Association for services in Sioux Lookout area.
- 3) Manitoba Region with University of Manitoba for services in Northern and rural Manitoba.
- 4) NWT Region with University of Manitoba for services in Central Arctic.
- 5) Medical Services Headquarters with University of Toronto for operation of the National School of Dental Therapy.

Agreements Proposed:

- 1) Alberta Region with Alberta Dental Association for services in designated areas.
- 2) Saskatchewan Region with the University of Saskatchewan for services in Northern Saskatchewan.

.../2

- 2 -

Mr. Hubert Drouin

If I can be of further assistance, I would be pleased to do so.

Sincerely,

W.R. Bedford, D.D.S., D.D.P.H.,
Senior Consultant, Dentistry,
Medical Services Branch.

BIOGRAPHICAL NOTES

JOHN FREDERICK REID, DDS FICD

Personal: Born - Vancouver, May 29, 1919
Married - Wife, Berta; 4 children; grandchildren

Education:

Early education in Vancouver
1940 Graduate of the Western College of Pharmacy
1950 Graduate McGill University - DDS

Military Service:

1940-45 Royal Canadian Dental Corps

Dental Association Membership:

1962 British Columbia Dental Association
- Director and Executive Committee

1966-68 Chairman, Dental Auxiliaries Committee
(preparatory to creation of Certified Dental
Assistant in B.C.)
1968-69 President

1968-70 Member (Federal Government) Wells Commission on
Dental Auxiliaries

Canadian Dental Association

1968-69 Member, Dental Services Committee
(now Council on Health Care)
1968-76 Member, Board of Governors
1972-76 Member, Executive Council
1973-74 President-Elect
1974-75 President
1975-76 Past-President

Other:

1972 - Fellow, International College of Dentists
1980- Member, Board of Trustees - Cdn Fund for Dental Education
1970-71 - District Governor, Gyro Clubs International

BIOGRAPHICAL NOTES

WILLIAM MILLER, BA DMD FICD

Personal:

Born - Australia, June 27, 1900

Education:

1926 - DMD - Oregon

1955 - BA - University of British Columbia
(39 years after high school graduation)

Dental Association Membership:

1949 - Fellow, International College of Dentists

Life Member - Vancouver and District Dental Society

1933-34 President, Vancouver and District Dental Society

1955 - 57 President, College of Dental Surgeons of British Columbia

1954 - Member, National Dental Examining Board of Canada

Canadian Dental Association:

1956-63 - Member, Board of Governors

1959-63 - Member, Executive Committee

1960-61 - President-Elect

1961-62 - President

1962-63 - Past-President

General Chairman, CDA Golden Jubilee Convention in Vancouver, June 1952

Other:

Religion: Anglican (lay reader, sometime preacher)

Retired at age 81 (October 1981) after 54 years of practice in Vancouver.

CURRICULUM VITAE

Name YEO, Douglas Jeffrey
Address Office of the Dean of Dentistry, Univ. of B.C.
312-2194 Health Sciences Mall,
Vancouver, B.C. Postal Code V6T 1W5
Office Telephone No. 228-3418 Area Code 604

Personal: Born Regina, Saskatchewan, January 16, 1924
Married - 2 children

Education:
University of Toronto, D.D.S. 1947 - 1951
University of Michigan, M.P.H. 1952 - 1953

Professional:
Dental Director, Cariboo Health Unit, Prince George, 1951 - 1952
Regional Dental Consultant for Fraser Valley Area 1953 - 1955
Director, Dental Health Services, Metropolitan
Vancouver Area 1955 - 1964
Associate Professor and Head, Professor, Assistant
Dean, Acting Dean, Associate Dean of Department of
Public and Community Dental Health, University of 1970 - 1978
British Columbia
University of British Columbia 1978 - 1983
Department Head, Director, Program of Dental Hygiene
Assistant Dean, Teaching of Public Speaking, Dental
Public Health, Ethics, Practice Management
Chairman, Dental Admissions Committee
Chairman, Building Utilization Committee
Chairman, Student Progress Committee
Member, Dental Hygiene Admissions Committee
Member, Dental Hygiene Curriculum Committee
Secretary, Faculty Executive Committee
Predental Student Counsellor
Chairman, Part-time Salaries Committee
Chairman, Summer Clinic Committee
Associate Dean, Undergraduate Student Affairs & Place-
ment.
Chairman, Subcommittee on Administrative Structure
Member, President's Committee for Selection of Dean
of Dentistry
Member, Hospital Services Committee
Member, President's Senior Appointments Committee 1977 - 1978
Member, Admissions Selection Committee, Fac. of Med.
Member, Audiovisual Services Committee
Chairman, Dental Hygiene Admissions Committee
Member, Building Utilization Committee
Chairman, President's Committee to Select Head,
Department of Oral Medicine.

Professional Activities:

Director, B.C. Dental Association
Chairman, Public Relations Committee, B.C. Dental Association
Member, Public Relations Committee, B.C. Dental Association
Chairman, Fluoridation Committee, B.C. Dental Association
Member and Past President, Intercity Pedodontics Study Club
Member, Dental Staff, Children's Hospital
Member, Vancouver and District Dental Society
Chairman, Publicity Committee, B.C. Dental Association and
Canadian Dental Association
Member, Council of College of Dental Surgeons of British Columbia
Executive member, B.C. Branch, Canadian Public Health Association
Treasurer, College of Dental Surgeons of British Columbia
Vice-President, College of Dental Surgeons of British Columbia
Member, Council on Public Health, Canadian Dental Association
Registrar, College of Dental Surgeons of British Columbia
B.C. Society of Forensic Odontology
Member, Committee on Student Affairs, Canadian Dental Association
Member, Council on Education, Canadian Dental Association
Member, Survey Policy Committee, Canadian Dental Association
Chairman, Council on Education, Canadian Dental Association
Executive Member, Association of Canadian Faculties of Dentistry
Executive Member, National Dental Examining Board
Examiner, Section on Public Health, Royal College of Dentists of
Canada
Canadian Association of Forensic Sciences
Vice-President, International College of Dentists (Canadian Section)
President, International College of Dentists (Canadian Section) 1983
Dental Consultant, Red Cross Youth
Dental Public Health - Nature, Relationships, Outlook
Third Party Dental Insurance Plans
Dental Consultant, Department of Human Resources
Member, Children's Dental Health Research Project
Consultant, Division of Dental Health Services, B.C. Ministry of
Health

Awards:

Mary Adele Daly Scholarship in Dentistry for Children, Toronto, 1951
Wallace Seccombe Memorial Award in Preventive Dentistry, Toronto, 1951
Delta Omega Honorary Society in Public Health, Michigan, 1953
Fellow, International College of Dentists, 1973
Fellow, Royal College of Dentists of Canada, 1975
Member, Pierre Fauchard Academy
Distinguished Service Award, Canadian Red Cross

OTHER BUSINESS

QUEBEC PROPOSAL TO HOST THE 1991 FDI CONGRESS IN MONTREAL

The sanction of the CDA was again requested to offer to host the 1991 Congress of the FDI, and the following recommendation was put forth. Following discussion, it was

RESOLVED:

83.71

WHEREAS, subject to the full understanding that final approval would depend on full financial details being available;

THAT CDA approve a proposal by the Quebec Dental Surgeons Association to host the 1991 Federation Dentaire Internationale Congress in Montreal, Quebec.

ADOPTED

CONSTITUTION AND BY-LAWS

REPORT OF THE COUNCIL ON CONSTITUTION & BY-LAWS TO THE 1983 ANNUAL CDA BOARD OF GOVERNORS

Members: Dr. G.H. Peacock, Saskatchewan, Chairman
Dr. G. Anthony, Newfoundland
Dr. B.M. Jackson, Ontario
Dr. B.W. Holmes, Executive Liaison

1. Council Meetings

Since the March Interim Board of Governors meeting, the Council has held two conference meetings by telephone, June 15th and June 22nd, the results of which are contained within this report.

2. Following the March, 1983 Board of Governors meeting and at the Board's direction, the revised approved CDA By-law No. 1 was circulated and input requested from corporate members, council chairmen and governors. It was apparent at the meeting that some further amendments may be desirable.

3. Review of Proposals for Amendment - Executive Council

The Executive Council, having reviewed proposals submitted by the above-mentioned, forwarded recommendations to the Council, in particular on matters of policy.

4. Proposals for Amendments to By-Law No. 1

Council subsequently considered the proposals submitted, and following a careful review of the Executive Council recommendations, correspondence, flow charts and other documentation, recommendations were herewith submitted to the Board of Governors, opposite the appropriate article/section in the By-law document.

APPENDIX A

APPENDIX B

5. Article XI, Section 6 - Management Committee - Terms of Reference

Council reviewed the amended Terms of Reference of the Management Committee as accepted by the Board of Governors (Resolution 83.5) and the change has been incorporated into By-law No. 1.

6. Article XVI, Section 4 h) Council on Insurance and Investments

Discussion at the Board meeting in March, 1983 resulted in clarification of this Article and rewording was accepted as developed.

APPENDIX C

RESOLVED:

83.28

THAT the appended Terms of Reference of the Council on Insurance & Investment be adopted and Article XVI, Section 4h be amended accordingly, with an addition to para 2, line 5 as follows:

"providing this is done in consultation with Ontario and Quebec".

ADOPTED

7. Article IX, Section 2 - Executive Council Composition

Proposals, subsequent to the initial request for input, were received by the Executive Director on May 24th, submitted by the Ontario Dental Association and relating to the composition of the Executive Council. These are appended for consideration.

Careful consideration was given to the recommendation of the Executive Council of May 6-7th that the Executive Council structure should remain unchanged and the request for amendment from the O.D.A. The following motion was introduced:

THAT Article IX, Executive Council be amended according to the recommendations I to VII, proposed by the Ontario Dental Association, dated May 24, 1983.

APPENDIX D

DEFEATED

Council pointed out that the proposals II to VII, are changes to bring the by-laws into accord, if the ODA proposal I was accepted.

8. Approval of Amendments

A motion was introduced from the floor, and it was

RESOLVED:

83.29

THAT By-law No. 1, as amended September 23, 1983, be adopted.

APPENDIX E

ADOPTED

CONSTITUTION & BY-LAWS

2.

Items for Information, Not Requiring Board Action

8. The Association of Prosthodontists of Canada submitted by-law amendments for review by Council to assure that there is no conflict with the national association. These amendments were accepted by the Council.
9. Council wishes to recognize the significant contribution made by former Chairman, Dr. W.D. McDougall on the revision of the present document.

Respectfully submitted

G.H. Peacock, Chairman
Council on Constitution
& By-laws

ADOPTION OF REPORT

The Board accepts the report of the Council on Constitution & By-laws with appreciation.

APPENDIX A

The Council on Constitution and By-Laws makes the following recommendations for amendments to the CDA By-Law No. 1 (March, 1983):

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
6	VI	5	Privileges of Members - Life Members <i>THAT Article VI, Section 5 be amended by deleting "without payment of a registration fee".</i>	ODA
6	VI	7	Privileges of Members - Students <i>THAT Article VI, Section 7 regarding the student member entitlement to vote for the office of President-Elect remain unchanged.</i>	ADA
7	VIII	1a	Board of Governors - Composition <i>THAT the word "licensed" be removed in this section where it precedes the words "active members".</i>	ODA
8	VIII	2e	Board of Governors - Elections <i>THAT Article VIII, Section 2e be amended to read: "No voting member... President-Elect".</i>	Dr. J.G. Silver
11	VIII	13c	Board of Governors - Financial Responsibility <i>THAT the word "other" be added preceding the words "non-voting members".</i>	ODA
11	VIII	15	Duties of the Chairman of the Board <i>THAT the suggested addition to this section is redundant.</i>	ODA

Council Recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
11	VIII	16	Duties of the Secretary of the Board <i>THAT the suggested addition to this Section is not required, as it is already covered under Article VIII, Section 8; the secretary of the Board being the Executive Director.</i>	ODA
12	IX	2	Executive Council Composition Council recommendation appears in the body of this report.	CFDS NSDA Dr. G. Pitkin ODA - 4/6/83 5/25/83
12	IX	4	Executive Council - Term of Office <i>THAT no change be made; the present term of office should remain.</i>	ODA
13	IX	7	Executive Council - Powers <i>THAT no change be made in the present wording.</i>	ODA
13	IX	8	Executive Council - Duties <i>THAT subsection d be removed.</i>	ODA

Council recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
15	X	6	Election of Officers <i>THAT no replacement be made of this section. Nominations for a member of the Council on Nominations are made from the floor, unlike other nominations to Councils.</i>	ODA
16	XI	1	Officers and Officials <i>THAT the wording "subject to Article IX, Section 6 and Section 8" be added to ss. (j); and that a new ss. (k) be added to read: "to succeed to the office of the Past-President".</i>	ODA
17	XI	5a	Duties of the Executive Director <i>THAT the words "of the central office" be deleted.</i>	ODA
18	XI	6	Management Committee <i>THAT the preamble be replaced with the following wording: "The Management Committee shall be a committee of the Executive Council and shall consist of three members, the President, the Immediate Past-President and the President-Elect who shall be the chairman."</i>	ODA

Recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
18	XII		Remuneration and Tenure of Officers	ODA
			<i>THAT the following wording be removed from Article XII, line 5 (following Executive Council): "and the fact that any such official is a governor of the Association shall not disqualify him from receiving such remuneration as may be so determined".</i>	
19	XIV		Meetings of Voting Members	ODA
			<i>THAT Article XIV remain unchanged.</i>	
			<i>It was noted that on advice of legal counsel, this Article meets with compliance of the Canada Corporations Act.</i>	
			<i>NOTE: Amendments to Sections 6, 8 & 9 are not therefore applicable.</i>	
20	XIV	6	Votes	Legal Counsel
			<i>THAT Article XIV, Section 6, line 3 read: "majority of votes of those present".</i>	
21	XVI	2	Councils and Committees	ODA
			<i>THAT Article XVI, Section 6 be amended according to Article IX, Section 2, if the ODA Proposal of May 25/83 is accepted.</i>	

Recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
23	XVI	4b	Dental Materials & Devices <i>THAT in ss. (ii) CSA will become Canadian Standards Association; and that the wording "International Organization will now read: "International Organization for Standardization (ISO)".</i>	R.Y. Barolet Chairman
23- 24	XVI	4c	Council on Education <i>THAT a subsection be added to read: "a lay person appointed by the Board of Governors".</i>	ADA
		4c 4	Council on Education <i>THAT this subsection be amended to read: "two persons from nominations by the Registrars".</i>	R. Thordarson, Registrar
		4c para 4	Council on Education <i>THAT this paragraph now read as follows: "The Canadian Forces Dental School, the Canadian Dental Hygienists Association, and the Canadian Dental Assistants Association shall be invited to send one (1) representative each to participate in a non-voting capacity".</i>	MDA ODA H. Drouin, Exec. Dir.

Recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
24	XVI	4c (iv)	Council on Education <i>THAT in line 3 the addition of the following statement that had been previously omitted (as approved by the Board in 1978): "such other areas of dental education as may from time to time be approved by the Board of GovernorsGovernors".</i>	H. Drouin, Exec. Dir.
26	XVI	4 f)	Council on Hospital Services <i>THAT line 1 read: " shall consist of five members, one of <u>each from</u> the Atlantic Columbia".</i>	ODA
26	XVI	4 g)	Council on Information Services <i>THAT line 1 read: "shall consist of five members, one of <u>each from</u> the Atlantic ... Columbia".</i>	ODA
27	XVI	4 h)	Council on Insurance & Investment <i>THAT the appended amendment to this Article be accepted.</i>	ODA
28	XVI	4 i)	Nominations - paragraph (iv) <i>THAT the words "as the Council sees fit, and" be deleted.</i>	ODA

Recommendations - continued

PAGE	ARTICLE	SECTION	TITLE	RECOMMENDED BY
31	XVIII		List of Active Members - line 3 <i>THAT the date be changed to read March 31st.</i>	ODA
32	XXI		Conflict of Interest <i>THAT Council does not support an addition to the Conflict of Interest statement.</i>	ODA
33	XXII		Rules <i>THAT Article XXII remain unchanged.</i>	ODA
34	XXIII	3	Scientific Sessions <i>THAT Article XXIII be amended as follows:</i> <i>"THAT the Executive Council shall provide for the management of and the arrangements for each scientific session, etc..."</i>	ODA
35	XXVII		Amendment of By-Laws <i>THAT Article XXVII remain as presently worded.</i>	ODA



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE

1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
TELEPHONE (613) 523-1770

March 9, 1983

M E M O R A N D U M

TO: Chairman & Members, Board of Governors
Chief Executive Officers, Corporate Members
Council Chairmen

FROM: Hubert Drouin, Executive Director

SUBJECT: Revision - Constitution and By-laws

In accordance with direction at the Board of Governors meeting on March 4th, this is a formal request that you once more review the appended revised Constitution and By-laws of the Association and provide my office with any amendments you may wish to have considered.

As you will recall, a number of amendments were approved at the time of the meeting and these have been incorporated into the document as directed by the Board of Governors.

Your recommendations must be received no later than April 10th, to allow time for review by the Executive Council and redrafting of any necessary changes by the Council on Constitution and By-laws. Following this action, the document will be reviewed at the pre-Board Executive Council meeting in July, prior to the Annual meeting of the Board of Governors in Vancouver.

Your early attention to this matter will be appreciated.

CDA Convention · VANCOUVER · Congrès de l'ADC

25-28 sept 1983





ALBERTA DENTAL ASSOCIATION

EXECUTIVE DIRECTOR, REGISTRAR

BRUNO P. MARTINELLO, D.D.S., D.D.P.H., F.R.C.D. (C.).

SUITE 101, 8230 - 105 STREET, EDMONTON, ALBERTA T6E 5H9 TELEPHONE 432-1012

22 March 1983

MAR 28 1983

Dr. O. McDougall, Chairman
Council on Constitution & By-laws
Canadian Dental Association
1815 Alta Vista Drive
OTTAWA, Ontario
K1G 3Y6

Dear Dr. McDougall:

Re: Revision - C.D.A. Constitution and By-laws

The Alberta Dental Association would like to submit the following points for consideration by the Council on Constitution and By-laws regarding the above document further to its submission to your Council of September 20th, 1982.

1. Article VI - Section 7 - Student Members

The Alberta Dental Association would like to reiterate that it is of the view that a clause should be included in Section 7 concerning the entitlement of the student member to vote for the election of the President-Elect of C.D.A.. It is our Association's concern that a situation could arise whereby the student member could have the deciding vote in such an election. This should not be, as he/she might not have sufficient knowledge of any of the candidates because of the short time they are involved with the C.D.A. Board of Governors.

2. Article XVI - Section 4(c) - Council on Education

It is noted that in the original draft item (c)(3) which was as shown below, has been deleted in both the March draft before the Board of Governors and in the subsequent March 9th, 1983, draft recently received from the C.D.A. office.

"(3) One lay person appointed by the Board of Governors."

It is suggested that perhaps the inclusion of an appropriate lay person could be a useful addition in the eyes of the public, government, etc..

... 2

- 2 -

Thank you for your consideration of the foregoing. We hope our remarks will be of some assistance to your Council.

Yours truly,

E. P. Martinello

E. P. Martinello, D.D.S., D.D.P.H., F.R.C.D.(C)
Executive Director, Registrar

BPM/pdw

cc: Dr. R. D. Kinniburgh
Dr. D. L. Thompson
Dr. E. F. Allison
Mr. H. E. Drouin



MANITOBA DENTAL ASSOCIATION

300-296 Kennedy Street, Winnipeg, Man. R3B 2M6

2 May 1983

Dr. W.R. Thompson
President
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Dr. Thompson:

Representatives of the Manitoba Dental Association have now reviewed the draft Constitution of the Canadian Dental Association.

Their review has identified one area of concern that we would like to bring to your attention.

The draft Constitution does not allow for Membership on the Council on Health Care or the Council on Education, by either the Canadian Dental Hygienist's Association or the Canadian Dental Assistant's Association.

It has been our experience in Manitoba, that a representative of the auxiliaries on our Board has brought a perspective to decision making that has been beneficial.

The Canadian Dental Association should allow the auxiliaries, through the new Constitution, to have a voting Member on both of the Councils so that they can have an opportunity to fully participate in the discussions and decisions. The Agendas of both Councils have significant impact on auxiliary education and utilization and it is not appropriate to exclude them.

Our view on this is not new to the Canadian Dental Association Board. Through this letter, we want it known that we re-affirm our earlier position.

Yours truly

John M. Dillon, B.D.S.,
President
Manitoba Dental Association



Nova Scotia Dental Association

2745 DUTCH VILLAGE ROAD, SUITE 205-206
HALIFAX, N.S. B3L 4G7

TELEPHONE 902-454-5449

April 6, 1983

Mr. Hubert Drouin
Executive Director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6



Dear Hubert:

With reference to your March 9, 1983, memorandum concerning "Revision - Constitution and ByLaws", we propose the following amendment:

It is proposed that Article IX Section 2 be amended to read; "The Executive Council shall consist of the President, Immediate Past President, President-Elect and seven additional members. The President-Elect and seven additional members shall be elected by the Board of Governors from its membership. The province from which a member is licensed at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The seven additional members consist of:

- (a) One from the Province of British Columbia.
- (b) One from the Province of Alberta.
- (c) One from the Provinces of Saskatchewan and Manitoba.
- (d) One from the Province of Ontario.
- (e) One from the Province of Quebec.
- (f) Two from the Provinces of New Brunswick, Nova Scotia, Prince Edward Island and Newfoundland."

This proposal, if adopted, will allow for greater regional input to the decision making process of Executive Council and enhance national issue communications within the Atlantic Provinces.

It is my understanding that Dr. Robertson, Atlantic Provinces representative on Executive Council will address this item at the upcoming Executive Council Meeting.

Yours truly,

NOVA SCOTIA DENTAL ASSOCIATION

D. V. Pamenter
Executive Director

DVP/jd

Copy of Letter from G.E. Pitkin, D.D.S. (from written copy)

G.E. Pitkin, D.D.S.
Suite 202
Victoria Park Avenue
Agincourt, Ontario MIT 1A2

April 4, 1983

Dear Hubert,

Regarding your memo of March 9/83 concerning the revised Constitution and By-laws, I have one major concern regarding Article IX, Section 2 Composition with respect to the make-up of the Executive Council. This concern is composed of an obvious factor and a not-so-obvious one.

The obvious concern is that restricting the composition of the Executive Council to purely geographical distribution could negate the whole concept of democracy. It will not always be true that the best candidates for the Executive Council will be evenly distributed throughout the length and breadth of Canada. This restrictive policy could very possibly eliminate superior candidates for this important office and I firmly believe our C.D.A. deserves only the very best representation based only on an individual's capabilities and not on an accident of geographical location. The best man for the job is still the main guiding principle in all successful organizations.

The less obvious concern that I have is of at least equal importance, if not more, to the more obvious one. Membership in the C.D.A. in Ontario, as we all know, is not what we would like to see. The number of Ontario dentists who deem the C.D.A. worthy of support is not something to brag about. Everything to promote a positive C.D.A. image within my province should be considered. There is a feeling that Ontario's representation on the Executive Council of the C.D.A. is lacking numerically in some areas of the province -- particularly within the Toronto core. In the past, Ontario has always had both representational and numerical importance in the Executive. In many instances, although the present quality of representation is high, the quantity is seen to be lacking.

I believe this restrictive clause should be removed from the revised Constitution and By-laws and the election to the office of Executive Council should be decided only by a candidate's merit and not by his home address. Ontario is not the only province affected by this clause - all provinces are to the same extent. Let democracy, not geography, be the policy for our Association.

Yours truly,
"Gary Pitkin, D.D.S."

C. D. A. MEMO

To Executive Council
From Hubert Drouin, Executive Director
Date April 8, 1983
Subject Amendment to CDA Constitution & By-laws

Please be advised that Article XVI, Section 4c - Council on Education (iv) Duties: should read:-

To accredit undergraduate, postgraduate and graduate programs in dentistry, programs in dental hygiene and dental assisting courses and such other areas of dental education as may from time to time be approved by the Board of Governors, and periodically review such accreditation in accordance with the requirements and standards approved by the Board of Governors.

The underlined wording was approved by the Executive Council in 1978 and appears in the Transactions as part of the Report of the Ad Hoc Committee on Education. The amendment was inadvertently omitted in the subsequent revision of the By-laws in 1979.

Further, I would bring to your attention suggested rewording for Article XVI, Section 4 c, para. 3 as follows:

The Canadian Forces Dental Services School, the Canadian Dental Hygienists Association and the Canadian Dental Assistants' Association shall be invited to send one (1)* representative to participate in a non-voting capacity. *each

This amendment removes a redundancy, in that the ACFD, RCDC and Council on Student Affairs do have voting representation and it is unnecessary to restate this fact.

Reference to financial responsibility has also been removed because the Association is financially responsible for members who are invited to attend the Council meeting.

The rewritten paragraph above also makes clear the participation of the CDHA and the CDAA on the Council on Education, in keeping with the CDA policy.

/pc

cc: Dr. W.D. McDougall, Chairman
Council on Const. & By-laws





COLLEGE OF DENTAL SURGEONS OF BRITISH COLUMBIA

1125 West Eighth Avenue, Vancouver, B.C. V6H 3N4

Area Code 604 - 736-3621

May 2, 1983

Dr. T.E. Ramage,
1506-805 West Broadway,
Vancouver, B.C.
V5Z 1K1

Dear Ted,

RE: CONSTITUTION & BY-LAWS C.D.A.

(1) Article V - Membership

The licensing authorities in Quebec and Ontario cannot be corporate members of CDA as a result, I understand, of provincial law.

Has any consideration been given to creation of a membership category for these two provinces and any others who are similarly divided such as Newfoundland and Nova Scotia and perhaps others in the future?

(2) Article VIII - Section 2 - Elections

If no change is possible in the membership section to include the currently excluded licensing boards, perhaps consideration of an addition to the specifics on how corporate members elect or appoint representatives would be in order. For example, add to (a) "except in those provinces where the corporate member is not also the licensing authority then the representative(s) should be selected jointly by the association and the licensing authority and appointed by the corporate member", or other words to achieve that intention.

(3) (c) Council on Education

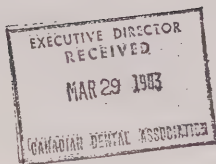
Item (4) should be modified to include two persons nominated by Registrars. This was a recommendation of the Report on Accreditation submitted to CDA by the 1981 Secretaries & Registrars' Conference and was approved by the Executive Committee. The Board meeting last September turned the recommendation down largely, as I recall, because it would require a change in the by-laws and which were under review. Perhaps omission of this change was an oversight.

I apologise for not having these comments in sooner. I had them prior to the March meeting and expected that the B.C. representatives might all get together to discuss some issues. That didn't happen. I then forgot to deal with them prior to the April deadline established by the Board.



ÉCOLE DE MÉDECINE DENTAIRE

UNIVERSITÉ LAVAL
CITÉ UNIVERSITAIRE
QUÉBEC, CANADA
G1K 7P4



March 24th, 1983

Mr. Hubert Drouin
Executive director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, K1G 3Y6

Dear Hubert:

Re "*Revision - Constitution and By-laws*", I have only 2 editorial suggestions to make on my Council's Terms of Reference, section 4, b, ii:

- C.S.A. should be spelled out to read "Canadian Standards Association" otherwise it could mean the Canadian Soup Association, Corporate Symbols of America, etc.
- After the last word "organization" add "for Standardization". The correct name of the group is "International organization for Standardization". I would also add the accepted abbreviation "ISO" in brackets at the end.

I trust that these minor editorial changes will not confuse matters too much.

Regards,

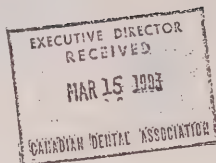
Ralph Barolet, D.D.S., M.S.D.
Chairman, Council on Dental
Materials and Devices

RYB/ja

THE UNIVERSITY OF BRITISH COLUMBIA

2199 WESBROOK MALL
VANCOUVER, B.C., CANADA
V6T 1Z7

FACULTY OF DENTISTRY



March 8, 1983

Mr. Hubert Drouin
Executive Director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Hubert

RE: CDA CONSTITUTION AND BY-LAWS

Further to the recent Board of Governors meeting I would like to restate my concerns regarding Article VIII of the CDA Constitution and By-laws (pages 7 and 8 of the document discussed at the meeting).

I believe section 1(b) is incompatible with section 2(e). The two non-voting members of the Board are appointed ex officio (1(b)). If they are only allowed to serve for six consecutive years (2(e)), the organizations they represent would be forced to remove them from office to concur with the CDA by-laws. This seems both unlikely and unnecessary.

I believe that minor rewording of section 2(e), relating six consecutive years of service to voting members of the Board only, would solve the above problem.

I would appreciate you bringing these comments to the attention of the Chairman of the Committee on Constitution and By-laws.

Yours sincerely,

J.G. Silver
Associate Professor and Head
Department of Oral Medicine



c.c. Pat Cunningham

National Defence

Défense nationale

National Defence Headquarters
Ottawa, Canada
K1A 0K2

Quartier général de la Défense nationale
Ottawa, Canada
K1A 0K2

1050-100/C12



24 March 1983

Mr. H. Drouin
Executive Director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Mr. Drouin:

REVISION - CONSTITUTION AND BY-LAWS

In reference to your memorandum of March 9, 1983, and as indicated at the March 4th, 1983 meeting of the Board of Governors, the Canadian Forces Dental Services (CFDS) is concerned that Article IX, Section 2 of the appended revised Constitution and By-laws of the Canadian Dental Association does not permit election of a member of the CFDS to the Executive Council. The only avenue available for a CFDS member to become a member of the Executive Council at present, is for another Corporate Body to voluntarily agree to allocate their vacancy to the CFDS.

It should be noted the CFDS supports regional representation on the executive council, however, this is not at present addressed in our case since our region is the Dominion of Canada and beyond. No one province can really speak for the CFDS.

The solution to the problem could perhaps be addressed by maintaining the present regional requirements and adding one or two vacancies which do not have a regional requirement. Another acceptable arrangement would be to eliminate specific regional guidelines with the proviso that no one corporate body would be allowed more than one or two representatives on the Council.

The CFDS does not want an established vacancy on the Executive Council but rather the opportunity to serve on the council when circumstances so warrant.

Sincerely,

J.N. Wright
Brigadier-General
Director General Dental Services

Canada

Executive
Director

The Ontario Dental Association



234 St. George Street
Toronto, Ontario M5R 2P1
(416) 922-3900

April 6, 1983



Mr. Hubert Drouin
Executive Director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Mr. Drouin:

Please find attached a list of proposed revisions to the CDA By-Laws.

You will note that some of these proposals are identified as "policy matters" and in our view these matters should be presented to the Board for debate as specific amendments. Accordingly, please accept this as "notice" as required in Article XXVII, Section 1.

The remainder of the items are suggestions for improving the document which may be incorporated if the Constitution and By-Laws Council so chooses.

Yours truly,

John C. Gillies, B.A., C.A.E.

JCG/pr
Att.

c.c. Dr. D.B. Smith
Dr. B.W. Holmes

The Ontario Dental Association



234 St. George Street
Toronto, Ontario M5R 2P1
(416) 922-3900

NOTES RE PROPOSED CDA BY-LAWS

Article VI - Privileges of Members

Section 5 Life Members

Policy
Disagreement

Recommend deletion of "without payment of a registration fee". The number of life members are expected to increase substantially which could erode the revenue base of future conventions. It would be possible for conventions managed directly by the CDA to extend this privilege while allowing fees to be charged when the convention is hosted by a corporate member.

Article VIII - Board of Governors

Section 1 Composition

(a) The term "licensed" is redundant as applied to licensed active members and should be deleted

Section 13 Financial Responsibility

(c) The word "other" should be added so that the section reads "responsibility for other non-voting members", as sub-section (b) makes provision to compensate some non-voting members.

Section 15 Duties of the Chairman of the Board

Suggest addition of

Policy
Disagreement

(e) To interpret the rules of procedure and By-laws as necessary to conduct meetings of the Board.

Section 16 Duties of the Secretary of the Board

A new part, (c) should be added to read,
"to cause to be published, notices of meetings or pertaining to meetings as required by the By-laws."

Article IX - Executive Council

Section 2 Composition

Policy Recommend that the following be deleted.
Disagreement "The six additional members SHALL consist of one from each of the following regions:"
and replace with
"Of the six additional members, no more than two members from any one corporate member shall serve on the Executive Council at any period of time."

Section 4 Term of Office

Policy The phrase "three (3) terms of (2) years each"
Disagreement should be amended by the deletion of "three" and inclusion of "two" so that the section reads, "two (2) terms of two (2) years each."

Section 7 Powers

The following should be deleted:
Policy (f) The time and manner of distribution of surplus
Disagreement funds to the members participating in insurance plans shall be determined by the Executive Council.
(g) The Executive Council will authorize and approve all contracts, agreements and the disposition of funds relating to insurance and investment programs
(h) The Executive Council will act as trustees for all insurance retention funds or surplus or reserve funds.
These duties should be incorporated under Article VIII, Section 6 - Duties (of the Board of Governors).

Section 8 Duties

Policy Recommend the deletion of
Disagreement (d) to approve all clinics and exhibits in line with policies established by the Board of Governors.

Article X - Election of Officers

Section 6

Suggest that the current wording be deleted and replaced with,
"The Elective Officers shall be elected in accordance with Article XVI, Section 2".

Article XI - Officers and Officials

Section 1 Elective Officers of the Association

Suggest that the Past-President be included so that the Section would read,

"The Elective Officers of the Association shall be the President, Past-President and President-Elect".

Section 2 Duties of the President

Suggest section (e) be amended by the addition of

"subject to Article IX, Section 6 and Section 8 (j)".

Suggest a new item, (k) be added -

"to succeed to the office of Past-President".

Section 5 Duties of the Executive Director

(a) Suggest removal of the words "central office" as redundant.

Section 6 Management Committee

Suggest deletion of the preamble and replacing it with,

"The Management Committee shall be a committee of the Executive Council and shall consist of three members, the President, the Immediate Past-President and the President-Elect who shall be the Chairman".

Article XII - Remuneration and Tenure of Officers of the Association

Policy
Disagreement

This section, as it is worded would allow a member to serve as a member of the Board of Governors and the Executive Director or other CDA staff position AT THE SAME TIME!

The section should be amended to prohibit a member holding positions as an elected official and a member of the CDA staff at the same time by deletion of the words "and the fact that any such official is a Governor of the Association shall not disqualify him from receiving such remuneration as may be so determined" where they appear following the remuneration of the Executive Director.

Article XIV - Voting Members

Policy
Disagreement

This section is presumably included to meet the requirement of the Canada Corporations Act AND to provide direct input from the Corporate Members.

The procedures outlined however, do not provide for direct Corporate Member responsibility but vest their duties in the Board of Governors.

The Article should be amended to provide for one person from each Corporate Member to be THE VOTING MEMBER who would exercise the number of votes equal to that Corporate Member's representation on the Board of Governors.

Section 6 Votes

Recommend deletion of "of the Governors present" and addition of a new section -

"Each Corporate Member shall have a vote or votes equal to the number of representatives of that Corporate body on the Board of Governors"

so the new section reads,

"Each Corporate Member shall have a vote or votes equal to the number of representatives of that Corporate body on the Board of Governors. Unless a greater majority is required by the provisions of the Canada Corporations Act, every question submitted to any meeting of voting members shall be decided by a majority of votes cast."

Section 8 Quorum

Recommend deletion of the section to be replaced with,

"For purposes of establishing the annual grants from the Corporate Members, Corporate Members holding a total of votes equal to a majority of the membership of the Board of Governors shall be necessary to constitute a quorum. For all other purposes, one half of the actual number of voting members shall be necessary to constitute a quorum."

Section 9

The Voting Members of the Association shall be the individuals appointed by each of the Corporate Members.

Article XVI - Councils and Committees

Section 2 Nomination and Election

- (b) Recommend deletion and replacement with the following:

"All council members shall be elected or appointed by the Board of Governors at the Annual Meeting pursuant to Article VIII, Section 3 and Article XVI, Section 2 (d) of these By-Laws."

Add new Section - Article XVI, Section 2 (d)

Policy
Disagreement

Where membership on a council or committee requires that certain members represent specific geographical areas or specific other organizations, the membership of these committees will be elected or appointed by the appropriate Corporate Member or specified organization for appointment to the committee by the Board of Governors.

Section 4 Terms of Reference for Council

- (c) Council on Education

Policy
Disagreement

As the Council on Education is composed of persons representing specific organizations, it is unnecessary for the same organization to have addition non-voting participation and it is recommended that the following be deleted:

"The Associates of Canada Faculties of Dentistry, the NDEB of Canada, the RCDC, the Council on Student Affairs"

so that the section reads,

"The Canadian Forces Dental Services have the privilege, without CDA financial responsibility, of non-voting participation on the Council of Education of one representative."

Recommend amendment of the following section to read,

"The Council on Education shall have the power to appoint committees and sub-committees as it shall deem expedient and for which funds have been approved by the Board of Governors."

For (f) Council on Hospital Services

(g) Council on Information Services

recommend deletion of "representative of" with "one from each of"

(h) Council on Insurance and Investment

In reference to (i), in our view, the summary of resolutions published by the CDA re the March Board Meeting is incorrect regarding the session.

The motion on the floor to which the Chairman declared unanimous consent was the duly seconded motion as phrased above. There was a suggestion by Dr. Holmes that the matter be deferred which was discussed but the motion before the Board, upon which they acted to which they gave unanimous consent was to amend the terms of reference of the Council on Insurance and Investment.

There is a problem in this section of the By-laws as the way the By-law published March 9, 1983, even with the above amendment appears to be "information" not a statement of policy which is inconsistent with the form of the rest of the By-laws.

Policy
Disagreement

(i) recommend following "the Province of Quebec", "and that the person has been nominated by the Corporate Members of the respective province".

(iv) recommend in each of the following sections, "Executive Council" be replaced with "Board of Governors" - (i) (iii) (v)

(i) Council on Nominations

(iv) recommend deletion of

"as the Council sees fit and" so that the section reads in part,

"to make further nominations to ensure that there is", etc.

Article XVIII - List of Active Members

Recommend that the due date be changed from March 1st to March 31st.

Article XXI - Conflict of Interest

Recommend adding a new section,

"A dentist serving as a dental consultant to and/or serving on a Board of and/or is otherwise employed by or has an ownership interest in an insurance company or any other corporate entity which funds, administers, underwrites, sells or recommends dental insurance plans or prepaid dental plans or which is involved in any manner with any type of insurance plan or service which may be offered to or purchased by a member is

deemed to have a conflict of interest and is not eligible to serve on any Board, Council or Committee of the Association."

Article XXII - Rules

Policy Recommend that this section be amended by addition
Disagreement of the phrase "as interpreted by the Chairman"
so that the section reads,
"Unless inconsistent with these By-laws, the Sturgis Standard Code of Parliamentary Procedure (Second Edition) as interpreted by the Chairman will apply."

Article XXIII - Scientific Sessions

Section 3 be amended so it reads,
"The Executive Council shall provide for the management of and the arrangements for each scientific session, etc."

Article XXVII - Amendment of By-laws

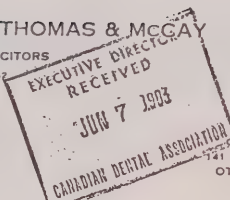
Policy Section 3
Disagreement Amendments to these By-laws for which notice has been given under Section 1 or waived under Section 2 may be further amended without notice by majority consent of the Board members present providing that the proposal as amended subsequently receives the approval required under Section 1 or Section 2.

LOW, MURCHISON, BURNS, THOMAS & MCCAY

BARRISTERS AND SOLICITORS

TELEPHONE 236-9447

ORIAN LOW, B.A., Q.C. (RETIRED)
KENNETH A. MURCHISON, B.COM., Q.C.
D. CAMPBELL BURNS, B.A., LL.B.
JOSEPH W. THOMAS, B.A.
GORDON J. MCCAY, B.Sc., LL.B.
PETER A. J. HARGADON, B.A., LL.B.
DOUGLAS W. J. SMYTH, B.A., LL.B.



TENTH FLOOR
STILLIN BUILDING
741 LAURIER AVE., WEST
OTTAWA, CANADA
K1P 5J3

June 6th, 1983.

Canadian Dental Association,
1815 Alta Vista Drive,
Ottawa, Ontario.
K1G 3Y6

Attention: Mr. H. Drouin

Dear Sirs:

I have considered your letter of May 19th, 1983, and I have the following comments to make.

1. The provisions in your existing by-law with respect to meetings of voting members, and indeed the status of corporate (voting) members so far as I can determine, predates the continuation of your association as it was incorporated in 1942. As you know the Association was originally established by private act in 1942 and had been existence for some considerable period of time prior to that date. From our examination of the by-laws filed in 1942, most of the matters relating to the classes of shares and the arrangements for corporate voting were in place at that time and were, in effect, approved by the government during that process.

As I have indicated to you in earlier correspondence and particularly my letters of April 14th, 1982, April 16th, 1982 and May 4, 1982, the "members" of your Association are the thousands of active members of your Association and indeed as I have mentioned to you in other correspondence, the Supplementary Letters Patent in 1972 specifically provide that the borrowing authority of your Association requires the approval of two-thirds of the votes cast at a special general meeting of the members and you will recall that in an earlier draft of the by-law sent to you I have included for a separate article to provide for the calling of meetings of active members if and when required. I was advised that such a provision would not be necessary and it was accordingly deleted in the final draft.

Accordingly, I am repeating that the provisions as they appear in various parts of your existing by-law relating to the meeting of voting members have been in their present form for a great many years and that they are in your by-laws because of the authority given to them in 1942. I agree that in their present form

these provisions are not logically arranged but I believe that the requirements indicated in the Ontario recommendation mentioned in your letter of May 19th, 1983 are already in place in the following way.

1. Corporate members are referred to and described as voting members in Article V, Section 1. This is confirmed in Article XIV, Section 9 where it is stated that the voting members of the Association shall be the corporate members represented by their appointees to the Board of Governors.

2. It should be noted that Article XIV, Section 5 provides for the method of identifying the representatives of the corporate members.

3. The procedure for carrying out the meetings of voting members are generally set out in Article XIV. May I remind you that I pointed out to you the words "of the Governors present" in Article XIV, Section 6 is obviously an error since at that stage, the members are not present in their capacity as governors, but rather as representatives of the corporate or voting members.

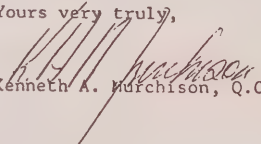
4. The number of votes to which each corporate member is entitled is set out in Article VI, Section 9.

The general structure of your Association is that the corporate members appoint governors and the governors effectively have full control of the Association. It is difficult to visualize the situation where there would actually be a meeting of "voting members". As previously indicated, if you found it necessary to enact a borrowing by-law in accordance with the wording in the 1972 Supplementary Letters Patent, it would be necessary to convene a meeting of your active members as distinct from your corporate members, but in order to give as much validity as possible to your borrowing by-law, the exact wording of the 1972 Supplementary Letters Patent has now been incorporated into your general by-law.

I have also noted the suggestion that a section 3 be added to Article XXVII. Again I may say that the present wording goes back a great many years and has been validated by reason of the provisions of your special Act in 1942. If it was not for the provisions of that Act, it would be necessary to obtain the approval of the active members to any amendments to the by-laws. As it is, it is only necessary to obtain the approval of two-thirds of the Board of Governors where appropriate notice has been given, or unanimous approval of the Board were such notice has not been given and in either case to obtain the approval of the Minister of Consumer and Corporate Affairs.

As I understand the suggestion made by Ontario that would be contained in Section 3, it would enable amendments to be made without notice by a simple majority of the Governors present. Ordinarily, in corporate law any amendments made by the Board of Directors are only effective until the next annual meeting of shareholders and if not approved at that point, such amendments are automatically repealed. By analogy with your association, any amendments made by its Board of Governors (directors) would only be effective until the next meeting of its active members (shareholders) and without that approval would be repealed. You were able to overcome that general concept because of the long standing provisions as to amendments in your by-laws, but I would not think that the Minister would approve of a change which is quite significant in enabling a mere majority of the governors present to amend the by-law without prior notice and I do not think that it would be in keeping with the general principles of representation in your association to make such a change.

Yours very truly,


Kenneth A. Murchison, Q.C.

KAM/jcm

SUGGESTED REVISION TO BY-LAWS -- AS ACCEPTED BY THE EXECUTIVE COUNCIL
RE COUNCIL ON INSURANCE AND INVESTMENT

Article XVI, Section 4 h) Council on Insurance and Investment

The Canadian Dental Association has delegated to the Canadian Dental Services Plans Inc. the functions of the Council on Insurance and Investment as a result of an administrative agreement between the two organizations. This agreement is to be reviewed annually by the Board of Governors of the Canadian Dental Association and Canadian Dental Service Plans Inc.

The Canadian Dental Association shall appoint two directors, provided that one such director shall be a resident of the Province of Ontario and the other shall be a resident of the Province of Quebec.

It shall be the duty of the Council on Insurance and Investment:

- (i) to recommend to the Executive Council the kinds of insurance and terms of coverage which are desirable for the membership to carry and which can be advantageously purveyed to the membership on a group basis;
- (ii) to survey the insurance market to determine the costs, terms and conditions of available coverage;
- (iii) to negotiate and recommend for approval to the Executive Council the costs, terms and conditions of contracts with the chosen carriers;
- (iv) to periodically review the insurance contracts in order to determine the suitability of contracts and the possibility of improved terms and of more economic terms and to assess the proposals of competing carriers;
- (v) to recommend to the Executive Council the time and manner of distribution of surplus or reserve funds;
- (vi) to advise on and review Association-sponsored pension and retirement savings plans;
- (vii) to report annually all actions to the Board of Governors.

Executive Council
July, 1983

Executive
Director

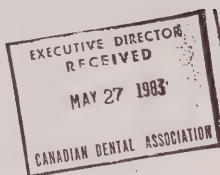
The Ontario Dental Association

APPENDIX D



234 St. George Street
Toronto, Ontario M5R 2P2
(416) 922-3900

May 25, 1983



Mr. Hubert Drouin
Executive Director
Canadian Dental Association
1815 Alta Vista Drive
Ottawa, Ontario
K1G 3Y6

Dear Mr. Drouin:

I have been directed to file with you a proposed amendment to the Canadian Dental Association By-Laws as provided in Article XXVII. Although your President requested that proposed amendments be submitted by April 10th, I believe that the conditions of the By-Laws are met as long as the amendment is submitted at least three months prior to the meeting of the Board of Governors and consequently that you will accept such notices prior to June 23rd.

I sincerely hope that the CDA Council on Constitution and By-Laws can give consideration to the enclosed when they meet on June 13th.

Yours truly,

John C. Gillies, B.A., C.A.E.

JCG/pr
Encl.

c.c. ODA Management Committee
Dr. B.W. Holmes
Dr. B.M. Jackson

The Ontario Dental Association



234 St. George Street
Toronto, Ontario M5R 2P1
(416) 922-3900

PROPOSALS FOR AMENDMENT OF CDA BY-LAWS

Submitted By

The Ontario Dental Association

May 24, 1983

Recommendation I

That Article IX, Executive Council, Section 2 Composition be amended by deletion of the words "and six additional members" in the second and third lines of the section, and that the words "and each region shall elect or appoint a governor from that region to the Executive Council in such a manner as the corporate member or members within the region may decide"

so that the Section, as amended reads

"The Executive Council shall consist of the President, Immediate Past President, President Elect and six additional members. The President Elect shall be elected by the Board of Governors from its membership. The province from which a member is licensed at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The six additional members consist of one each from the following regions and each region shall elect or appoint a governor from that region to the Executive Council in such a manner as the corporate member or members within the region may decide:

- a) Province of British Columbia
- b) Province of Alberta
- c) Province of Saskatchewan - Manitoba
- d) Province of Ontario
- e) Province of Quebec
- f) Provinces of New Brunswick, Nova Scotia, P.E.I. and Newfoundland "

Recommendation II

That Section 5 Election be amended by deletion and replacement with

"Members of the Executive Council shall commence their term of office immediately following an annual meeting and shall hold office until the conclusion of the annual meeting at the end of the term of office to which they have been appointed."

Recommendation III

That Section 6 Vacancy be amended by deletion and replacement with

"In the event of a vacancy in the Membership of the Executive Council, the corporate member or members of the region from which the vacancy occurs shall elect or appoint a member of the Board of Governors to fill that portion of the unexpired term."

Recommendation IV

That Article VIII, Board of Governors, Section 6 Duties, be amended by deletion of paragraph (b) "to elect members of the Executive Council".

Recommendation V

That Article X, Election of Officers, preamble, be amended by the deletion of "and members of the Executive".

Recommendation VI

That Article X, Election of Officers, Section 5 be amended by the deletion of "other members of the Executive Council".

Recommendation VII

That Article X, Election of Officers be amended by adding Section 9 "Where the By-Laws stipulate that membership on Councils or Committees be on a geographical basis, the members will be elected or appointed by the corporate member or members within the region in such a manner as the corporate member or members within the region may decide."

NOTE: The above will be presently applicable to the
Council on Health Care
Council on Hospital Services
Council on Information Services
as well as to the Executive Council.

RESOLUTION No. 83.29

AMENDMENTS INDEX

83.28 Article XVI, Section 4 h) Council on Insurance and Investment

THAT the appended Terms of Reference of the Council on Insurance and Investment be adopted with an addition to para 2, line 5 which states: "providing this is done in consultation with Ontario and Quebec.

ADOPTED

83.29 THAT By-law No. 1, as amended to September 23, 1983 be adopted.

ADOPTED

NOTE -- The Board adopted all recommendations submitted by the Executive Council within the By-law No. 1 document with the following exceptions:

83.30 Article VIII, Section 2 (e) be amended to read:
No member of the Association shall be eligible to be a voting Member of the Board.....
President-Elect.

Article XIV - Meetings of Voting Members will be referred back to the Council on Constitution and By-laws for further clarification and consideration.

83.31 Article XVI, Section 4 (c) be amended to read:

Two persons from Nominations by the Conference on National Licensing Bodies.

83.32 Article XVI, Section 4 (c) para 4 amendment was defeated and the new motion reads:

THAT Article XVI be reconsidered following the Report of the Ad Hoc Committee on Hospital Services and consideration of the Report of the Council on Education which contains recommended Terms of Reference.

83.34

MOTION (from the floor)

THAT in view of the fact that the Ad Hoc Committee on Hospital Services has not submitted its final recommendations, the CDHA and the CDAA be invited to send one (1) representative each to the next meeting of the Council on Education to participate in a non-voting capacity.

83.35

THAT Article XXVII be amended with the addition of the following:

Section 3 - Amendments to these by-laws for which notice has been given under Section 1 or waived under Section 2 may be further amended without notice by majority consent of the Board members present providing that the proposal as amended subsequently receives the approval required under Section 1 or Section 2.

Direction:

The Board of Governors directed that the Council on Constitution and By-laws reconsider the present Conflict of Interest statement. (Article XXI).

CANADIAN DENTAL ASSOCIATION
L'ASSOCIATION DENTAIRE CANADIENNE

BY-LAW NO. 1

A By-law relating generally to the transaction of the business and affairs of the Canadian Dental Association, l'Association dentaire canadienne.

Be it enacted and it is hereby enacted as a By-law of the Canadian Dental Association, l'Association dentaire canadienne (hereinafter called the "Association") as follows:

ARTICLE I

NAME

The name of the Association shall be the Canadian Dental Association and in French, l'Association dentaire canadienne.

ARTICLE II

HEAD OFFICE

The head office of the Association shall be in the Regional Municipality of Ottawa-Carleton, in the Province of Ontario and at such place therein as the Board of Governors may from time to time determine.

ARTICLE III

SEAL

The seal, an impression whereof is stamped in the margin hereof, shall be the corporate seal of the Association.

ARTICLE IV

OBJECTS AND PURPOSES

The objectives and purposes of the Association shall be as follows:

- (a) to cultivate and promote the art and science of dentistry, and all its collateral branches; and to protect and maintain the honour and interests of the dental profession;

- (b) to conduct, direct, encourage, support or provide for exhaustive dental and oral research;
- (c) to elevate and sustain the professional character and education of dentists;
- (d) to promote mutual improvement, social intercourse, and good-will among the members of the profession;
- (e) to enlighten and direct public opinion in relation to oral hygiene, dental prophylaxis, oral health and advanced scientific dental service;
- (f) to disseminate knowledge of dentistry and dental discoveries;
- (g) to have cognizance of and safeguard the common interests of the dental profession;
- (h) to publish dental journals, reports and treatises;
- (i) to promote the delivery of high quality comprehensive dental (oral) health care service to all residents of Canada;
- (j) to do all further or other lawful things and acts as are incidental or conducive to the attainment of the above objects.

ARTICLE V

MEMBERSHIP

There shall be eight (8) classes of members in the Association: Corporate (voting), Active, Affiliate, Honorary, Life, Associate, Student and Supporting Members.

Section 1 Corporate Members (Voting Members)

- (a) Corporate members shall consist of the provincial statutory dental associations and the Canadian Forces Dental Services.
- (b) The following shall be eligible for Corporate membership on payment of the annual fee:

The College of Dental Surgeons of British Columbia
The Alberta Dental Association
The College of Dental Surgeons of Saskatchewan
The Manitoba Dental Association
The Ontario Dental Association
L'Association des chirurgiens-dentistes du Québec
The New Brunswick Dental Society
The Nova Scotia Dental Association
The Dental Association of Prince Edward Island
The Newfoundland Dental Association
The Canadian Forces Dental Services

- (c) Continuance of membership by a Corporate member shall be contingent upon payment of an annual fee established by Article XIX.
- (d) Corporate membership shall terminate and be deemed to be assigned to the Board of Governors of the Association if a Corporate member fails to pay its annual fee when payable.
- (e) No corporate member shall withdraw from membership except upon written notice to the President of the Association who will present the notice to the next annual meeting of the Board of Governors.
- (f) A Corporate member may withdraw membership one year after notice of withdrawal of membership has been received.
- (g) Corporate membership of a withdrawing member shall be deemed to be assigned to the Board of Governors of the Association.
- (h) The Executive Director will advise the Corporate members of any notice of withdrawal of membership, or of any failure to make payment of the annual fee when payable, within thirty days of receipt of such notice by the President or within thirty days of the expiry of the payment date of the annual fee, or at the next annual meeting of the Board of Governors, whichever date shall occur first.

Section 2 Active Members

Licensed dentists who are members in good standing of the Corporate Member in a Province of Canada shall become Active Members on recommendation of the Corporate Member and on payment of the appropriate annual fee. A specialist licensed in the Province of Quebec and therefore a member of the Order of Dentists of Quebec can be considered an Active Member of the Canadian Dental Association upon payment of the annual dues.

Section 3 Affiliate Members

Dentists in good standing, licensed to practise dentistry in a Province or Territory of Canada, but who are not members of the Corporate Member for that Province or Territory shall become Affiliate Members on payment of the appropriate annual fee.

Section 4 Honorary Members

Persons who shall have rendered valuable service to the Association, and such other persons as may be determined by the Executive Council shall, with their own consent and upon election as such by the Executive Council, be Honorary Members of the Association.

Section 5 Life Members

Any dentist who has practised his profession for at least 40 years or who, on attaining his sixty-fifth birthday is at such time a member in good standing of the Association may at his request and upon approval of the Executive Council become a Life Member of the Association.

Section 6 Associate Members

Any dentist in good standing, graduated by a Canadian faculty of dentistry, but not licensed to practice in a Province of Canada, or who has retired from practice, or who qualifies through special mitigating circumstances, may apply to the Executive Council to be granted Associate membership and shall become an Associate Member upon being admitted by the Executive Council and upon payment of the appropriate fee.

Section 7 Student Members

Any undergraduate student in an accredited dental school in Canada who has been recommended for membership by the Council on Student Affairs, or, any graduate dentist otherwise eligible for an Active or Affiliate membership who has gone directly from an undergraduate program to a full academic year or more of advanced study in a university, or in a hospital program approved by the Association, shall be granted Student Membership classification upon payment of the appropriate fee. All new graduates who have been student members in good standing of the Canadian Dental Association for the prescribed period shall be granted the status of an Active Member of the Canadian Dental Association from the date of graduation until December 31st of the year of graduation.

Section 8 Supporting Members

A person having an interest in the well-being of the Association and who does not otherwise qualify as an Active, Affiliate, Honorary, Life, Associate or Student Member shall be eligible to apply for admission as a Supporting Member and shall become a Supporting Member on being admitted by the Executive Council and upon payment of the appropriate fee.

ARTICLE VI

PRIVILEGES OF MEMBERS

Section 1 Corporate Members

- (a) A corporate member may assign its Corporate Membership to another provincial dental corporation, provincial association, or other appropriate dental body within the same province, subject to the approval of the Board of Governors.

Corporate Members shall be entitled to appoint one or more members to the Board of Governors in accordance with Article VIII Section 1(a), and shall be entitled to receive statistical data and such other analyses produced regularly by the Association and to contract for and purchase research and other services available through the Association.

- (b) A Corporate Member shall select and designate its representatives to the Board of Governors pursuant to Article VIII, Section 2(a), 2(b), and Section 3.

- (c) A Corporate Member may make submissions to the Board of Governors by way of submitted resolutions pursuant to Article VIII, Section 10.

Section 2 Active Members

- (a) An Active member in good standing shall be entitled annually to a certificate of membership, to receive the Journal of the Canadian Dental Association, to attend scientific meetings of the Association on payment of applicable registration fees and to enjoy all other facilities of the Association.
- (b) An Active member in good standing shall be eligible for election or appointment to any office of the Association, except as otherwise provided in these by-laws.
- (c) An Active member under disciplinary sentence of suspension by a provincial licensing body may not hold office in the Association or participate in its proceedings. Temporary suspension will not be cause to forfeit eligibility to Association-sponsored insurance and investment plans.
- (d) Active members shall not be entitled to vote on any questions arising at meetings of voting members.

Section 3 Affiliate Members

- (a) An Affiliate member in good standing shall be entitled annually to receive a certificate of membership and the Journal of the Canadian Dental Association.
- (b) An Affiliate member shall be entitled to attend scientific sessions of the Association on payment of applicable registration fees and to enjoy such other services as are authorized by the Executive Council. He shall not be entitled to serve as a member of the Board of Governors, the Executive Council or as chairman of a council. Affiliate members shall not be entitled to vote on any question arising at any meeting of members of the Association.
- (c) Affiliate members will not be caused to forfeit eligibility to Association-sponsored insurance and investment plans while under temporary disciplinary suspension of license.

Section 4 Honorary Members

An Honorary member shall be entitled to receive a certificate of Honorary membership and a complimentary subscription to the Journal of the Canadian Dental Association. He shall be entitled to attend scientific meetings under the auspices of the Association without payment of registration fee. An Honorary member shall not be entitled to vote on any question arising at any meeting of members of the Association.

Section 5 Life Members

* A Life member shall be entitled to receive a certificate of life membership and a complimentary subscription of the Journal of the Canadian Dental Association. He shall be entitled to attend scientific meetings under the auspices of the association. A life member shall not be assessed any regular association grants or dues. A life member shall not be entitled to vote on any question arising at any meeting of the members of the Association.

Section 6 Associate Members

An Associate member in good standing shall have the same rights and privileges as an Affiliate member.

Section 7 Student Members

- (a) A Student member in good standing shall be entitled annually to a certificate of membership, to receive the Journal of the Canadian Dental Association, to attend scientific meetings of the Association on payment of applicable registration fees and to enjoy all other facilities of the Association.
- (b) A Student member in good standing shall be eligible for election to any office or agency of the Association except as otherwise provided in the By-laws and except that he shall not be entitled to serve as a member of the Executive Council.
- (c) A Student member shall be entitled to vote in the election of members of the Council on Student Affairs.

Section 8 Supporting Members

A Supporting member in good standing shall be entitled annually to receive a certificate of membership and the Journal of the Canadian Dental Association. He shall be entitled to attend scientific sessions of the Association on payment of applicable fees and to enjoy such other services as are authorized by the Executive Council. A Supporting member shall not be entitled to vote on any question arising at any meeting of members of the Association, but shall be able to participate in the insurance and investment programs of the Association.

Section 9 Entitlement to Vote

Subject to the provisions of the Canada Corporations Act, only the Corporate members shall be entitled to vote at a meeting of members, the number of votes to which each such Corporate member is entitled shall be determined in the same manner as provided in Article VIII.

ARTICLE VII

TERMINATION OF MEMBERSHIP

The interest of any member of the Association, other than a Corporate member, is not transferable and lapses and ceases to exist

- (a) if the dues or assessments due and payable by such member are more than two (2) months in arrears of the date of termination of the fiscal year of the appropriate corporate member,
- (b) upon the death of the member; and
- (c) upon the resignation by notice in writing addressed to the Executive Director of the Association, which resignation shall be effective upon receipt thereof by the Executive Director.

The transferability of the interest of a Corporate member and its rights with respect to termination of its membership in the Association shall be as set out in Article V, Section 1.

ARTICLE VIII

BOARD OF GOVERNORS

Section 1 Composition

- * (a) There shall be a Board of Governors which shall include (i) the President; (ii) the Immediate Past President; (iii) the President-Elect; (iv) one member from each Provincial Corporate Member for the first 500 active and licensed life members or part thereof exclusive of members who are officers of the Canadian Forces Dental Services; (v) one member for each additional 500 active and licensed life members or majority thereof in each province, exclusive of members who are officers in the Canadian Forces Dental Services; (vi) one member representative of the Student members; (vii) one member for each 500 active and licensed life members or part thereof of the members who are officers in the Canadian Forces Dental Services. Every member of the Board other than a Student Member shall while holding office be and remain an Active Member of the Association.
- (b) In addition, there shall be two non-voting members, namely, the senior dental representative of the Department of National Health and Welfare and the Department of Veterans Affairs.
- (c) The Chairman of the Board of Governors and the appointed officials of the Association shall be ex-officio members without the power to vote.

Section 2 Elections

- (a) Each Corporate member shall elect or appoint its representative or representatives to the Board of Governors in such manner as the Corporate member may decide.
- (b) In like manner the Council on Student Affairs shall select its representative member on the Board of Governors.

- (c) When the representative of the Corporate member assumes the office of President or President-Elect such Corporate member shall elect or appoint another representative to fill the vacancy on the Board of Governors so created for the duration of the said President's or President-Elect's term of office.
- (d) No person shall be eligible for election or appointment until he has signified in writing his willingness to serve, his agreement to adhere to the By-laws of the Association and of his intention of attending meetings of the Board of Governors while a member.
- * (e) No member of the Association shall be eligible to be a voting member of the Board of Governors for more than three consecutive terms of two years, unless he is elected to the office of President-Elect in which case he shall automatically remain on the Board of Governors for three additional years from the time he becomes President-Elect.

Section 3 Certification

The Secretary of each Corporate member at least sixty days prior to the first session of the annual meeting of the Board of Governors shall provide the Executive Director with the names of its representative and representatives. In the event of sickness or other forced absence of a representative or representatives, or if such representative should vacate such office pursuant to Section 4 of this Article, a Corporate member may change its representative or representatives providing notification of such change is given in writing to the Executive Director before seating the alternative representative and provided that such alternative representative is and remains qualified to hold such office.

Section 4 Vacation of Office

The office of a member of the Board of Governors shall ipso facto be vacated

- (a) if his name is removed from the register of dentists, licensed to practise in a province in Canada.
- (b) upon receipt of notification from the Corporate member or the Council on Student Affairs he represents.
- (c) if he is convicted of a criminal offence.
- (d) if by notice in writing to the Executive Director of the Association he resigns his office.

Section 5 Powers

- (a) The Board of Governors shall be the supreme authoritative body of the Association.
- (b) It shall determine the policies which shall govern the Association.
- (c) It shall have the power to enact, amend and repeal the By-laws governing the Association pursuant to Article XXVII.

- (d) It shall have the power to adopt and amend the Code of Ethics.
- (e) It shall have the power to approve all memorials, resolutions, and opinions to be issued in the name of the Association.
- (f) It shall have the power to conduct, in all other particulars, the affairs of the Association.
- (g) Unless inconsistent with these By-Laws, the Sturgis Standard Code of Parliamentary Procedure (Second Edition) will apply.

Section 6 Duties

It shall be the duty of the Board of Governors:

- (a) to elect the Officers of the Association.
- (b) to elect members of the Executive Council.
- (c) to elect members of other councils.
- (d) to receive and act upon reports of the Executive Council, other councils and committees.
- (e) to adopt an annual budget.
- (f) to hear and determine any matters under dispute within the Association.
- (g) to receive and consider submitted resolutions from Corporate members.
- (h) to establish policy of the Association, such policy being declared as such by a majority of the votes cast of the Board of Governors present at the meeting considering the same.

Section 7 Board Sessions

- (a) Annual Session

The Board of Governors shall meet at least once annually at such time and place as may be determined by the Executive Council.

- (b) Interim Session

An interim session of the Board of Governors shall be called by the President on a majority vote of the Executive Council or on written request of a majority of the members of the Board of Governors. The time and place of the interim session shall be determined by the President but must not be more than forty-five (45) days after receipt of such request. The agenda of an interim session shall contain the subject or subjects referred to in the application for an interim session but shall be enlarged to include such other matters as proposed by governors who are not party to the application for an interim session by majority vote of the members present and voting at an interim session.

Section 8 Notice of Meetings

(a) Annual Session

The Executive Director shall cause to be published in the Journal of the Canadian Dental Association an official notice of the time and place of each annual session and shall send to each member of the Board of Governors an official notice of the time and place of the annual session at least thirty (30) days before the opening of such session.

(b) Interim Session

The Executive Director shall send an official notice of time and place of each interim session and a statement of the business to be considered thereat to each member of the Board of Governors not less than fifteen (15) days before the opening of such session.

Section 9 Quorum

A majority of the voting members of the Board of Governors shall constitute a quorum at all meetings of the Board of Governors. Every question submitted to a meeting of the Board of Governors shall be decided by a majority of the votes cast, except insofar as it relates to Article XXVII.

Section 10 Submitted Resolutions

Any Corporate member of the Association may submit a written resolution for consideration by the Board of Governors provided such resolution is received at the offices of the Association at least 30 days before the next annual or interim session of the Board.

Section 11 Privilege of the Floor

At the discretion of the Chairman of the Board, any member of the Association or any other person may be granted the privilege to address a meeting of the Board.

Section 12 Remuneration of Governors

The Board of Governors of the Association shall serve without remuneration and no governor shall directly or indirectly receive any profit from his position as such; provided, however, that a governor may be paid reasonable expenses incurred by him in the performance of his duties to the Association. Nothing herein contained shall be construed to preclude any governor from serving the Association as an officer or official or in any other capacity and receiving compensation therefor.

Section 13 Financial Responsibility

- (a) The Association shall assume reasonable expenses for the President, President-Elect, and immediate Past President and voting members of the Board of Governors to attend sessions of the Board of Governors, as defined in the Association's policies.

- (b) The Association shall also assume reasonable expenses for the Chairman of the Board of Governors, the appointed officials and the chairman of councils to attend sessions of the Board of Governors.
- * (c) The financial responsibility for other non-voting members to attend sessions of the Board of Governors shall not be assumed by the Association.

Section 14 Officers of the Board of Governors

Chairman and Secretary - The officers of the Board of Governors shall be the Chairman of the Board and Secretary of the Board. The Chairman shall be elected annually by the Board of Governors and shall be a member of the Board of Governors without the right to vote. Only an Active or Honorary member in good standing in the Association shall be eligible to serve as Chairman. The Executive Director shall, subject to these By-laws, serve as Secretary to the Board. In the absence of the Secretary of the Board, the Chairman of the Board shall appoint a Secretary of the Board pro tem.

Section 15 Duties of the Chairman of the Board

- (a) to preside at meetings of the Board of Governors and perform such duties as custom and parliamentary usage require.
- (b) to appoint a secretary pro tem in the absence of the Secretary of the Board.
- (c) to appoint, with the consent of the Board of Governors, special committees to perform duties not otherwise assigned by By-laws, which special committees shall serve until adjournment of the session at which they were appointed.
- (d) to appoint scrutineers to assist in determining the result taken by vote of the Board of Governors.

The Chairman of the Board shall hold no other elective office in the Association while he is serving as Chairman of the Board.

Section 16 Duties of the Secretary of the Board

It shall be the duty of the Secretary of the Board

- (a) to serve as the recording officer of the Board of Governors and the custodian of its records.
- (b) to cause a record of the proceedings of the Board of Governors to be published as the official transactions of the Board of Governors.

ARTICLE IX

EXECUTIVE COUNCIL

Section 1

There shall be an Executive Council of the Association.

Section 2 Composition

The Executive Council shall consist of the President, Immediate Past President, President-Elect and six additional members. The President-Elect and six additional members shall be elected by the Board of Governors from its membership. The province from which a member is licensed at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The six additional members shall consist of one each from the following regions:

- (a) Province of British Columbia
- (b) Province of Alberta
- (c) Provinces of Saskatchewan - Manitoba
- (d) Province of Ontario
- (e) Province of Quebec
- (f) Provinces of New Brunswick, Nova Scotia, P.E.I., and Newfoundland.

Section 3 Qualifications

A member of the Executive Council must be a member of the Board of Governors. Should the status of any member of the Executive Council change in regard to the preceding qualifications during his term of office, that office shall be declared vacant by the President and such vacancy shall be filled as provided in Section 6 of this Article.

Section 4 Term of Office

The term of office of member of the Executive Council shall be two years. The consecutive tenure of a member of the Executive Council shall be limited to three (3) terms of two (2) years each.

Section 5 Election

Members of the Executive Council shall be elected during the annual meeting of the Board of Governors pursuant to Article X.

Section 6 Vacancy

In the event of a vacancy in the membership of the Executive Council, the Executive Council shall nominate and the President shall appoint a member of the Board of Governors to fill that portion of the unexpired term.

Section 7 Powers

The Executive Council shall conduct all business of the Association when the Board of Governors is not in session, subject to the Letters Patent, By-laws of the Association and the mandates of the Board of Governors.

- (a) The Executive Council shall have power to establish administration rules and regulations not inconsistent with these by-laws.
- (b) The Executive Council shall have power to direct the President to call a special session of the Board of Governors pursuant to Article VIII, Section 7.
- (c) The Executive Council shall have full discretionary powers to cause to be published in or omitted from any official publication of the Association, any article in whole or in part, except the editorials written or approved by the Editors.
- (d) The Executive Council shall have power to establish interim policies when the Board of Governors is not in session and where such policies in the discretion of the Executive Council are essential to the management of the Association, provided however that such policies must be reported to the members of the Board of Governors within fourteen (14) days of establishment thereof and presented by the Executive Council for review at the next following session of the Board of Governors.
- (e) The Executive Council shall have the right to elect Honorary members.
- (f) The time and manner of distribution of surplus funds to the members participating in insurance plans shall be determined by the Executive Council.
- (g) The Executive Council will authorize and approve all contracts, agreements or the disposition of funds relating to insurance and investment programmes.
- (h) The Executive Council will act as trustees for all insurance retention funds or surplus or reserve funds.

Section 8 Duties

It shall be the duty of the Executive Council

- (a) to supervise the maintenance of headquarters property owned or operated by the Association.
- (b) to appoint the Executive Director of the Association.
- (c) to determine the date and place for convening each annual meeting of the Association.
- (d) to approve all clinics and exhibits in line with policies established by the Board of Governors.
- (e) to cause to be bonded by a surety company all appointed officers and employees of the Association entrusted with Association funds.

- (f) to ensure all accounts of the Association are audited by a certified chartered accountant at least once a year.
- (g) to prepare a budget for carrying on the activities of the Association for each ensuing fiscal year.
- (h) to review reports prepared for presentation and make recommendations concerning each report to the Board of Governors.
- (i) to submit an annual report of the Executive Council activities to the Board of Governors and following each Executive Council meeting to submit a summary statement of the business of the meeting to the members of the Board of Governors.
- (j) to annually recommend to the President chairmen of the councils excluding Executive, Student Affairs and Nominations from among membership of the respective councils as elected by the Board of Governors.
- (k) to perform such other duties as are prescribed in these By-laws.
- (l) to admit Associate, Affiliate and Supporting members pursuant to Article V, Section 3, 6 and 8, and to elect Honorary members pursuant to Article V, Section 4.
- (m) to grant awards from time to time in accordance with the guidelines established by the Board of Governors.

Section 9 Sessions

- (a) Regular Session

The Executive Council shall hold at least four regular sessions in each year.

- (b) Special Session

Special sessions of the Executive Council may be called at any time by the President. The President shall call a special session on request of a majority of Executive Council members. At least ten days' notice must be given to each member of the Executive Council in advance of such special session. The business of a special session shall be limited to that stated in the notice calling such session except by the unanimous consent of the members present and voting at such session.

Section 10 Quorum

Six of the voting members of the Executive Council shall constitute a quorum and any question submitted to a meeting shall be determined by a majority of the votes cast of the members present. In the event of an equality of votes, the President or other member occupying the chair shall not have a second or deciding vote.

ARTICLE X

ELECTION OF OFFICERS

The election of officers, Chairman of the Board of Governors and members of the Executive and other councils shall take place at the annual meeting of the Board of Governors and shall be by vote of the members of the Board of Governors.

Section 1

In the event the office of Chairman of the Board becomes vacant, such vacancy shall be filled at the next Annual or Interim Meeting of the Board of Governors following the nomination election procedures contained in Article X. The President shall fulfill the duties of the Chairman from the time any vacancy in the office of Chairman occurs until such time as a new Chairman has been elected.

Section 2

In the event the office of President becomes vacant, the President-Elect shall become President for the unexpired portion of the term. In the event the office of President-Elect becomes vacant, the office of President for the ensuing year shall be filled at the next Annual Meeting of the Board in the same manner as provided for nominations and election of Elective Officers.

Section 3

In the event the office of Past-President becomes vacant, the office shall remain vacant until the current President assumes the position of Past-President following the next Annual Meeting of the Board of Governors.

Section 4

The report presented by the Nominations Council shall be received in advance of the annual meeting by the Board of Governors and the complete list of names of proposed candidates shall be placed in nomination at the annual meeting.

Section 5

The President-Elect, other members of the Executive Council, Chairman of the Board of Governors and members of other councils shall be elected by separate ballot.

Section 6

Nominations for a member of the Nominations Council for a term of three (3) years shall be made from the floor by a member or members of the Board of Governors.

Section 7

All elections shall be by ballot and a majority vote of the Governors present shall be necessary to elect. In case no candidate receives a majority of the votes cast on the first ballot, the one receiving the least number of votes shall be dropped and a new ballot shall be taken. This procedure shall be continued until a candidate receives a majority of all votes cast, when he shall be declared elected.

Section 8

Except as otherwise provided in these By-laws the elected officers, the members of the Executive and other councils shall assume and continue to hold office from the termination of one annual meeting to the termination of the next following annual meeting.

ARTICLE XI

OFFICERS AND OFFICIALS

Section 1 Elective Officers of the Association

The elective officers of the Association shall be the President and President-Elect. Only Active members of the Association who are in good standing and are voting members of the Board of Governors shall be eligible to serve as elective officers.

Section 2 Duties of the President

It shall be the duty of the President:

- (a) to preside at all meetings of the Executive Council in accordance with recognized parliamentary usage.
- (b) to serve as an official representative of the Association in its contacts with government, civic, business and professional organizations for the purpose of advancing the objects and policies of the Association.
- (c) to serve as an ex-officio member of all councils of the Association.
- (d) to make a report at the annual meeting of the Board of Governors.
- (e) to make interim appointments in case of vacancies occurring in the Executive Council or in other councils.
- (f) to appoint special committees when considered necessary.
- (g) to call special sessions of the Executive Council.
- (h) to sign all official documents requiring his signature.

- (i) to delegate his responsibilities for appropriate reason when he is unable to fulfill same.
- * (j) to perform such other duties as may be provided in these By-laws subject to Article IX, Section 6 and Section 8.
- * (k) to succeed to the office of the Past-President.

Section 3 Duties of the President-Elect

It shall be the duty of the President-Elect:

- (a) to assist the President as requested in the performance of his duties.
- (b) to serve as Acting President in the event that the office of the President becomes vacant.
- (c) to act as Chairman of the Management Committee.
- (d) to succeed to the office of the President at the next annual meeting of the Board of Governors following his election as President-Elect.

Section 4 Duties of the Immediate Past President

It shall be the duty of the Immediate Past President:

- (a) to assist the President as requested, in the performance of his duties.
- (b) to act as Chairman of the Nominations Council.
- (c) to be a member of the Management Committee.
- (d) to act as Chairman of the Membership Committee (effective immediately after the annual Board of Governors' meeting).

Section 5 Duties of the Executive Director

The duties of the Executive Director shall be:

- * (a) to act as executive head of the Association.
- (b) to engage all employees of the Association except as otherwise provided in these By-laws.
- (c) to co-ordinate the activities of the Executive Council and all councils of the Association.
- (d) to offer advice on all policy matters to the Board of Governors, other Councils and Committees of the Association.
- (e) to direct that the policies of the Board of Governors be implemented.

- (f) to draw on the resources of the Association in preparing assistance to the Board of Governors, other Councils and Committees of the Association.
- (g) to keep the records, minutes and be custodian of books, papers, documents and seal of the Association.
- (h) to pay all accounts and keep accurate record of receipts and disbursements.
- (i) to furnish a surety bond in amount determined by the Executive Council, the premium of which shall be paid by the Association.
- (j) to perform such other duties as usually appertain to this office or as may be designated by the Executive Council or these By-laws.

Section 6 Management Committee

* The Management Committee shall be a committee of the Executive Council and shall consist of three members, the President, the Immediate Past-President and the President-Elect who shall be the chairman:

- (a) to serve as custodian of all monies, securities and deeds belonging to the Association.
- (b) to present an annual report to the Board of Governors including the Auditors' Report for the preceding year and the budget that has been proposed for the next succeeding fiscal year.
- (c) to perform such other duties as may be designated by the Executive Council or these By-laws.
- (d) to keep a minute book.

ARTICLE XII

* REMUNERATION AND TENURE OF OFFICERS OF THE ASSOCIATION

The remuneration of all elective officers shall be determined from time to time by resolution of the Board of Governors and the fact that any such officer is a governor of the Association shall not disqualify him from receiving such remuneration as may be so determined. The remuneration of the Executive Director of the Association shall be determined from time to time by resolution of the Executive Council. All elective officers, subject to the provisions of these By-laws, and in the absence of agreement to the contrary, shall be subject to removal by resolution of the Board of Governors at any time. The Executive Director, subject to the provisions of these By-laws, and in the absence of agreement to the contrary, shall be subject to removal by resolution of the Executive Council at any time. Officers of the Board of Governors shall receive no remuneration for acting as such. The Secretary of the Board of Governors shall be subject to removal by resolution of the Board of Governors at any time.

ARTICLE XIII

INDEMNITY OF GOVERNORS AND OFFICERS

Subject to the provisions of the Canada Corporations Act, every Governor and officer of the Association, every former Governor or officer of the Association and his heirs and legal representatives shall, from time to time, be indemnified and saved harmless by the Association from and against all costs, charges and expenses, including an amount paid to settle an action or satisfy a judgment, reasonably incurred by him in respect of any civil, criminal or administrative action or proceeding to which he is made a party by reason of being or having been a Governor or officer of the Association, if,

- (a) he acted honestly and in good faith with a view to the best interests of the Association and
- (b) in the case of a criminal or administrative action or proceeding that is enforced by a monetary penalty, he had reasonable grounds for believing that his conduct was lawful.

ARTICLE XIV

MEETINGS OF VOTING MEMBERS

Section 1 Annual Meeting

Subject to the provisions of the Canada Corporations Act, the annual meeting of the voting members shall be held at the head office of the Association or elsewhere within Canada on such day in each year as the Executive Council may by resolution determine.

Section 2 Special Meetings

Other meetings of the voting members, whether special or general, may be convened by the President or the President-Elect or by the Board of Governors at any time or any place.

Section 3 Notice

A printed, written or typewritten notice, stating the day, hour and place of meeting and the general nature of the business to be transacted shall be served, either personally or by sending such notice to each voting member entitled to notice of such meetings, and to the auditor of the Association through the post in a prepaid wrapper or a letter at least ten (10) days (exclusive of the day of mailing but inclusive of the day for such notice is given) before the date of every meeting directed to such address of each voting member entitled to notice as appears on the books of the Association; provided always that a meeting of voting members may be held for any purpose at any time and at any place without notice if all the voting members entitled to notice of such meeting are represented or if all the non-represented voting members are entitled to notice shall have signified their assent in writing or by cable or telegram, addressed to the Executive Director, to such meeting being held. Notice of any meeting or any irregularity in any meeting or any notice thereof may be waived by any voting member or by the auditor of the Association.

Section 4 Omission of Notice

The accidental omission to give notice of any meeting or the non-receipt of any notice by any voting member or members shall not invalidate any resolution passed or any proceedings taken at any meeting of voting members.

Section 5 - Entitlement to Vote

Any Corporate Member wishing to be represented at a meeting of Voting Members of the Association shall give written notice of the persons to vote on behalf of such Corporate Member to the Executive Director of the Association at least 24 hours prior to any meeting of the Voting Members of the Association.

Section 6 Votes

Unless a greater majority is required by the provisions of the Canada Corporations Act, every question submitted to any meeting of voting members shall be decided by a majority of votes of the Governors present.

Section 7 Chairman of Meetings

The Chairman of the Board of Governors, or in his absence the President, or in his absence the President-Elect, shall be the Chairman of a meeting of voting members.

Section 8 Quorum

For purposes of establishing the annual grants from the corporate members, a majority of the members of the Board of Governors shall be necessary to constitute a quorum. For all other purposes, one-half of the members of the Board of Governors shall be necessary to constitute a quorum.

Section 9 Voting Members

The Voting Members of the Association shall be the Corporate Members represented by their appointees to the Board of Governors.

ARTICLE XV

AUDITORS

The Corporate members shall at each annual meeting of voting members appoint an auditor to audit the accounts of the Association and to hold office until the next annual meeting, provided that the Board of Governors may fill any casual vacancies in the office of auditor. The remuneration of the auditor shall be fixed by the Executive Council.

ARTICLE XVI

COUNCILS AND COMMITTEES

Section 1 Councils and Committees

(a) Councils

The Councils of the Association shall be

- Constitution and By-laws
- Dental Materials and Devices
- Education
- Ethics
- Health Care
- Hospital Services
- Information Services
- Insurance and Investment
- Nominations
- Student Affairs

(b) Committees

Special committees as may be established by the Board of Governors and/or the Executive Council.

Section 2 Nomination and Election

- (a) Nominees for membership on councils shall be placed in nomination at the annual meeting of the Board of Governors.
- (b) All council members shall be elected or appointed by the Board of Governors at the annual meeting pursuant to Article XVI, Section 2(d) of these by-laws.
- (c) The Council on Nominations shall be nominated and elected by the Board of Governors at the annual meeting pursuant to Article X, Section 6 of these by-laws.

Section 3 General Rules

- (a) The term of office of council members other than members of the Executive Council shall be three years.
- (b) Except as otherwise provided in these By-laws, the tenure of office shall be limited to two terms of three years each except that an appointment to fill the unexpired portion of a vacancy shall not be considered as a term of office under these rules.
- (c) A majority of the members of a council shall constitute a quorum thereof.

- (d) The Chairman of each Council shall be appointed annually by the President of the Association on the recommendation of the Executive Council and any vacancy occurring in the office of Chairman of any Council shall be filled by appointment of the President.
- (e) When a new chairman of a council is designated, the former chairman shall turn over to the Executive Director all pertinent subject matter.
- (f) The chairman of each council shall present a report of the council's activities to the annual meeting of the Board of Governors and at such other times as requested by the Board of Governors or the Executive Council.
- (g) The Chairman of each Council shall be responsible for presentation of a proposed budget for the succeeding fiscal year, to the Executive Council.
- (h) Any activities contemplated which are not covered by the stated duties must be sanctioned by the Board of Governors or the Executive Council before action is taken thereon.
- (i) The Board of Governors may alter the rules or terms of reference at any time pursuant to Article VIII, Section 5 of these By-laws.

Section 4 Terms of Reference for Councils

- (a) Council on Constitution and By-laws

The Constitution and By-laws Council shall consist of four (4) members.

It shall be the duty of the Constitution and By-laws Council:

- (i) to review the By-laws, Letters Patent and any Supplementary Letters Patent from time to time in order to keep them consistent with the Association's program.
- (ii) to recommend amendments to the By-laws when considered necessary.
- (iii) to draft or review with comment the text of all proposed amendments to the By-laws, Letters Patent and any Supplementary Letters Patent prior to their submission to the Board of Governors pursuant to Article XXVII.

- (b) Council on Dental Materials and Devices

The Council on Dental Materials and Devices shall consist of eight (8) persons who shall be appointed annually by the Board of Governors. It shall be the duty of the Dental Materials and Devices Council:

- (i) to act in an advisory and consultative capacity for evaluation of those materials and devices employed in the practice of dentistry and in the maintenance of oral health.
- * (ii) to develop Canadian standards for dental materials and devices in liaison with the Canadian Standards Association and other standards writing organizations and through the Standards Council of Canada with the International Organization for Standardization (ISO).
- (iii) to encourage a programme for testing, evaluation, acceptance and certification in Canada.
- (iv) to call upon consultants for assistance and advice, where appropriate, with the approval of Executive Council.
- (v) to review and comment where necessary on advertising and/or demonstration of any non-pharmacological aspects of materials and devices employed in dental procedures falling within the jurisdiction of this Council.
- (vi) to report on a regular basis to the Executive Council and to the Board of Governors and to provide an annual budget for approval.
- (vii) to communicate to the Membership through the CDA journal and by other means, such information as it considers to be of interest and importance to the dental practitioners.
- (viii) to maintain a liaison with the American Dental Association Council on Dental Materials.
- (ix) to maintain an active liaison with the Health Protection Branch, Department of National Health and Welfare and other agencies concerned with dental materials and devices.
- (x) to recommend annually to the Executive Council, the recipient of the C.D.R.F. Award.

(c) Council on Education

The Council on Education shall consist of thirteen members. In electing the membership of the Council the Board of Governors will assure that representation is constituted as follows:

- (1) Three members shall be full-time active members of the Faculties of Canadian Dental Schools.
- (2) Four members shall not be full-time Dental Faculty members. The Chairman shall be appointed by the Executive Council from Groups 1 and 2.
- (3) One person nominated by the Council on Student Affairs.

- * (4) Two persons from nominations of the Registrars, by the Conference on National Licensing Bodies.
- (5) One person from nominations by National Dental Examining Board of Canada.
- (6) One person from nominations by Association of Canadian Faculties of Dentistry.
- (7) One person from nominations by Royal College of Dentists of Canada.
- * (8) A lay person appointed by the Board of Governors.

The election to Council is for a three-year term, staggered, once renewable except for the student member, who shall be elected for one year renewable. No person shall hold more than one position on the Council nor may he represent more than one organization or group.

The Association of Canadian Faculties of Dentistry, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, the Council on Student Affairs and the Canadian Forces Dental Services have the privilege, without Canadian Dental Association financial responsibility, of non-voting participation in the Council on Education of one representative each.

The Council on Education shall have the power to appoint committees and subcommittees as it shall deem expedient.

The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and recommend for employment such other personnel as is needed from within or without the membership of the Association for any purpose within its jurisdiction, providing that if such appointments involve expenditures of funds other than those already allotted to the council they must be approved by the Board of Governors.

It shall be the duty of the Council of Education:

- (i) to give study to all matters relating to dental education.
- (ii) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to Dental Education.
- (iii) to evaluate the various forms of dental education and to recommend revisions to the Board of Governors when necessary.
- * (iv) to accredit undergraduate, postgraduate and graduate programs in dentistry, programs in dental hygiene, and dental assisting courses, and periodically review such accreditation in accordance with requirements and standards approved by the Board of Governors and such other areas of dental education as may from time to time be approved by the Board of Governors.

- (v) to approve dental internships and residencies in accordance with requirements and standards approved by the Board of Governors, when such dental internships and residencies are components of accreditable postgraduate and graduate programs.
 - (vi) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to specialization in dentistry to programs leading to specialist qualifications.
 - (vii) to recommend to the Board of Governors methods of assisting corporate members and/or provincial licensing bodies with respect to dental education, when requested.
- (d) Council on Ethics

The Ethics Council shall consist of five members.

It shall be the duty of the Ethics Council:

- (i) to study all matters relating to the ethical standing of the profession.
- (ii) to recommend statement of ethical standards that are in the best interests of all concerned.
- (iii) to work with the corporate members for the establishment of ethical standards which are acceptable to the profession.

(e) Council on Health Care

The Council on Health Care shall consist of one voting member from each corporate body and a Chairman. The Canadian Dental Association shall have no financial responsibility for non-members of the CDA.

Following the selection of the Chairman of the Council on Health Care by the Executive Council, the President of the Canadian Dental Association, in consultation with corporate body from which the Chairman is selected, is authorized to appoint another representative from that province to fill the vacancy on the Council.

It shall be the duty of the Council on Health Care:

- (i) to gather and evaluate information to formulate position papers and guidelines, and to make recommendations to the Board of Governors on matters relating to dental health care, dental programs and auxiliary personnel;
- (ii) to review by appropriate means all methods of reducing oral disease and to formulate guidelines for their implementation;

- (iii) to be cognizant of programs and methods of providing dental services and to develop related policies and guidelines;
- (iv) to study matters and to develop guidelines relating to the development and utilization of auxiliary dental personnel;
- (v) to liaise with appropriate agencies and to identify resource personnel and documents relating to the above;
- (vi) to act upon any related matter that may from time to time be assigned by the Executive Council.

(f) Council on Hospital Services

- * The Hospital Services Council shall consist of five members, one of each from the Atlantic Provinces, Quebec, Ontario, the Prairie Provinces and British Columbia.

That following selection by the Executive Council of the Chairman of the Council on Hospital Services, the CDA President in consultation with the corporate body or region of corporate bodies from which the Chairman is selected is authorized to appoint another representative from that Province or region to fill the vacancy created on the Council.

It shall be the duty of the Hospital Services Council:

- (i) to assist in maintaining a high standard of dental services in Canadian Hospitals.
- (ii) to approve hospital dental services and to define roles and responsibilities which meet the requirements of the Corporate Members.
- (iii) to examine and report on the Provincial Acts governing provision of dental services in hospitals.

(g) Council on Information Services

- * The Council on Information Services shall consist of five members, one of each from the Atlantic Provinces, Quebec, Ontario, the Prairie Provinces and British Columbia.

It shall be the duty of the Council on Information Services:

- (i) to develop guidelines for methods and programs to disseminate educational material to the public;
- (ii) to develop guidelines for methods and programs to effectively communicate with members of the Association.

(h) Council on Insurance and Investment

*

The Canadian Dental Association has delegated to the Canadian Dental Service Plans Inc. the functions of the Council on Insurance and Investment as a result of an administrative agreement between the two organizations. This agreement is to be reviewed annually by the Board of Governors of the Canadian Dental Association and Canadian Dental Service Plans Inc.

The Canadian Dental Association shall appoint two directors, provided that one such director shall be a resident of the Province of Ontario and the other shall be a resident of the Province of Quebec, providing this is done in consultation with Ontario and Quebec.

It shall be the duty of the Council on Insurance and Investment:

- (i) to recommend to the Executive Council the kinds of insurance and terms of coverage which are desirable for the membership to carry and which can be advantageously purveyed to the membership on a group basis;
- (ii) to survey the insurance market to determine the costs, terms and conditions of available coverage;
- (iii) to negotiate and recommend for approval to the Executive Council the costs, terms and conditions of contracts with the chosen carriers;
- (iv) to periodically review the insurance contracts in order to determine the suitability of contracts and the possibility of improved terms and of more economic terms and to assess the proposals of competing carriers;
- (v) to recommend to the Executive Council the time and manner of distribution of surplus or reserve funds;
- (vi) to advise on and review Association-sponsored pension and retirement savings plans;
- (vii) to report annually all actions to the Board of Governors.

(i) Council on Nominations

The Nominations Council shall consist of three members elected by the Board at its annual meeting pursuant to Article X, Section 6, of these By-laws, together with the Past-President, who shall be chairman. The membership should be geographically representative of the Association and should include one or more past-presidents.

It shall be the duty of the Nominations Council:

- (i) to prepare a list of all elective offices to be filled, excluding those for the Nominations Council, and submit this list ninety (90) days before the next annual session to members of the Board of Governors, council chairmen, presidents and secretaries of Corporate members, and presidents and secretaries of Sections.
 - (ii) to invite, and receive in writing, nominations for each of the above elective offices. Nominations may be made only by members of the Board of Governors, council chairmen, presidents or secretaries of Corporate members, presidents or secretaries of Sections. Except in the case of nominations to the Nominations Council itself nominations from the floor during the annual meetings will not be valid unless there are withdrawals from the list of nominations as presented by the Council on Nominations. The Board may then make further nominations from the floor.
 - (iii) to rule on the eligibility of the nominees in accordance with Articles IX and X.
 - * (iv) to make further nominations to ensure that there is at least one eligible nominee for each vacancy. The Nominations Council shall not make nominations as to its own membership as provided in Article X, Section 6 of these By-laws.
 - (v) to submit an annual report, listing alphabetically all eligible nominees for each open elective office. The annual report is to be included with other council reports for advance distribution prior to the annual meeting.
- (j) Council on Student Affairs

The Council on Student Affairs shall consist of fourteen members as follows:

- (i) one from each of 10 Canadian faculties of dentistry (two of whom are to be elected Chairman-elect and Governor-elect), the 8 remaining members are elected for a one-year term.
- (ii) the 4 additional members include the CDA Governor (non-voting); the CDA Past-Governor; Council Chairman and Council Past-Chairman.

It shall be the duty of the Council on Student Affairs:

- (i) to report, at least annually, to the Board of Governors on students' interests and activities.
- (ii) to be responsible for the effective organization and conduct of the Annual Canadian Dental Students' Conference.
- (iii) to recommend on policies bearing on student members' involvement in national and international dental student affairs.
- (iv) to encourage and promote membership in the Association by Canadian dental students.
- (v) to appoint its representative to the Board of Governors.

Section 5 Special Committees

Special committees of the Association may be created at any session of the Board of Governors or, when the Board of Governors is not in session, by the Executive Council, for the purpose of performing duties not otherwise assigned by these by-laws.

ARTICLE XVII

SECTIONS

Sections of the Association shall be the national organizations of the specialties recognized by the Association and which have applied for and have been admitted to Section status by the Board of Governors.

- (a) The Sections of the Association are:

SPECIALTY	ASSOCIATION/SOCIETY
Endodontics	Cdn Academy of Endodontics
Oral & Maxillofacial Surgery	Cdn Assoc. of Oral & Maxillofacial Surgeons
Oral Pathology	Cdn Academy of Oral Pathology
Oral Radiology	Cdn Academy of Oral Radiology
Orthodontics	Cdn Assoc. of Orthodontists
Paedodontics	Cdn Academy of Paedodontics
Periodontology	Cdn Academy of Periodontology
Prosthodontics	The Assoc. of Prosthodontists of Canada
Public Health Dentistry	Cdn Society of Public Health Dentists

- (b) Terms of Reference

- (i) All Constitution and By-Laws of a Section applicant must accompany the application for Section status for approval by the Board of Governors. Such by-laws and regulations will be available at the Board meeting at which the matter is discussed but will not be distributed in the agenda books or printed in the transactions.
- (ii) All amendments to the Constitution and By-Laws of the Section shall be forwarded forthwith to the Constitution and By-laws Council for review. Any conflict with the Constitution and By-laws or Regulations of the Association shall be resolved by mutual consent in consultation with the respective Section. Failure on the part of such Section to amend its By-laws or Regulations to conform with those of the Association may result in loss of Section status.
- (iii) The Constitution and By-laws submitted with applications for Section status and all proposed amendments to Section Constitution and By-laws are to be submitted to the CDA Council on Constitution and By-laws no later than four (4) months preceding the annual meeting of the Board of Governors at which action is to be taken.

- (iv) Membership in a Section shall be determined by the members of that Section.
- (v) Only Active Members of the CDA shall be eligible to serve as representatives to the CDA.
- (vi) A Section shall be financially self-supporting.
- (vii) The Chairman of each Section, or his official representative, shall report annually to the Board of Governors.

(c) Functions

It shall be the functions of Sections:

- (i) to supplement and cooperate with the activities of the Association.
- (ii) to act in an advisory capacity to the Association on matters relating to the Sections.
- (iii) to encourage better service for the public in practice, teaching and research in the specialized branch of dentistry.
- (iv) to assist the Association in the development of programs for the annual conventions.
- (v) to assist in the dissemination of scientific knowledge through contributions of its members to scientific programs and journals.

ARTICLE XVIII

LIST OF ACTIVE MEMBERS

* A list setting forth in alphabetical order the names and addresses of all licensed dentists recommended by each Corporate member for admission to and/or continuance of Active membership shall be submitted annually, on or before March 31st in each year.

Forthwith upon the admission of any Individual member to membership in the Association, a membership card shall be forwarded to each member. Every person included in the list of recommended licensed dentists submitted by a Corporate member shall be deemed to be an applicant for membership in the Association unless, within thirty days of receipt of such application of his membership card in the Association, he shall notify the Executive Director that he does not desire to be or to continue to be a member.

ARTICLE XIX

REVENUE

Section 1

The revenue of the Association shall be derived chiefly from membership fees from Active Members, the amount thereof to be determined by the Board of Governors. Fees that shall be forwarded by the Corporate members shall consist of a Corporate membership based on the number of members in the Corporation, and individual fees from CDA Active members, payable on March 1st of the calendar year. Fees for other categories of membership shall be collected by the Board of Governors.

Section 2

There shall be due and payable by each Affiliate, Associate, Student and Supporting member an annual fee, the amount of which shall be determined from year to year by the Executive Council.

ARTICLE XX

ETHICS

Section 1

It shall be unethical for a dentist in the pursuit of his profession to do anything with regard to it which would be reasonably regarded as disgraceful or dishonourable by his professional colleagues.

Section 2

Membership shall imply acceptance of the Code of Ethics of the Association.

ARTICLE XXI

CONFLICT OF INTEREST

Section 1

- (a) Every member of the Board of Governors of the Association who has directly or indirectly any interest in any contract or transaction to which the Association is or is to be a party, shall declare his material interest in such a contract or transaction at a meeting of the Board of Governors at which the contract or transaction is first considered. He then will absent himself from discussion and voting on such contract or transaction.

- (b) If a Governor has made a declaration in compliance with the above provisions and he has not voted in respect of the contract or transaction, and if he has acted honestly and in good faith, he is not accountable to the Association for any profit or gain realized and the contract or transaction is not voided.
- (c) The above provisions apply automatically to the members of the various Committees and Councils of the Association. Each Board and/or Council or Committee member in order to make sufficient disclosure, is required to do so not only to his Council, etc., members but also to the Board of Governors in writing.
- (d) All nominees for election or appointment to Councils or Committees of the Association shall declare on the nomination form, all possible potential conflicts of interest. These shall be made known to the Board prior to the election.
- (e) No otherwise qualified member of the Board of Governors shall be nominated or eligible for election to the Executive Council or shall continue to be a member of the Executive Council if he becomes interested or involved directly or indirectly in any business or undertaking which provides dental supplies or services of any kind to the dental profession.
- (f) That, of itself, being a Trustee of the CDA administered insurance and investment plans and/or of itself being a representative of the CDA to the Board of Canadian Dental Service Plans Incorporated shall not constitute a potential conflict of interest for a current member or a candidate for election to the Executive Council of the CDA.
- (g) That no otherwise qualified member of councils of the Association shall continue to be a member if he becomes interested in or involved, directly or indirectly, in any business or undertaking which provides dental supplies or services of any kind to the dental profession.
- (h) The Board shall be the final authority on any disputed conflict of interest.

ARTICLE XXII

RULES

Unless inconsistent with these By-Laws, the Sturgis Standard Code of Parliamentary Procedure (Second Edition) will apply.

ARTICLE XXIII

SCIENTIFIC SESSIONS

Section I

Annual scientific sessions of the Association shall be established to foster the presentation and discussion of subjects pertaining to the improvement of the dental health of the public and the science and art of dentistry.

Section 2

The time and place of the annual scientific session of the Association shall be determined by the Executive Council.

Section 3

* The Executive Council shall provide for the management of and the arrangements for each scientific session, including the establishment and collection of registration fees.

ARTICLE XXIV

EXECUTION OF DOCUMENTS

Contracts, documents or instruments in writing requiring the signature of the Association and approved by the Executive Council or the Board of Governors, may be signed and sealed by the Executive Director, together with any one of the voting members of the Management Committee who shall be President, Past-President or President-Elect, and all contracts, documents and instruments as executed shall be binding upon the Association without any further authorization or formality. The Executive Council shall have the power from time to time by resolution to appoint any person or persons on behalf of the Association either to sign contracts, documents or instruments in writing generally or to sign specific contracts, documents or instruments in writing and if required to affix the corporate seal of the Association thereto.

ARTICLE XXV

BORROWING POWERS

The Board of Governors may from time to time:

Section 1

- (a) borrow money upon the credit of the Association;
- (b) limit or increase the amount to be borrowed;
- (c) issue debentures or other securities of the Association;
- (d) pledge or sell such debentures or other securities for such sums and at such prices as may be deemed expedient; and
- (e) secure any such debentures, or other securities, or any other present or future borrowing or liability of the Association, by mortgage, hypothec, charge or pledge of all or any currently owned or subsequently acquired real and personal, movable and immovable, property of the Association and the undertaking and rights of the Association.

Section 2

From time to time, the Board of Governors may authorize any governor, officer or employee of the Association or any other persons to make arrangements with reference to the monies borrowed or to be borrowed as aforesaid and as to the terms and conditions of the loans thereof, and as to the securities to be given therefor, and to give such additional securities for any monies borrowed or remaining due by the Association as the Board of Governors may authorize, and generally to manage, transact and settle the borrowing of money by the Association.

Section 3

Nothing in this by-law limits or restricts the borrowing of money by the Association on bills of exchange or promissory notes made, drawn, accepted or endorsed by or on behalf of the Association.

ARTICLE XXVI

FISCAL YEAR

The fiscal year of the Association shall be the year ending December 31st.

ARTICLE XXVII

AMENDMENT OF BY-LAWS

Section 1

These By-laws may be amended or repealed by the Board of Governors in session provided that a copy of the proposed amendments shall have been mailed to the Executive Director of the Association at least three months prior to the meeting of the Board of Governors at which action upon such amendments is proposed to be taken. A copy of such proposed amendments shall be forthwith mailed by the Executive Director to each member of the Board of Governors, to the Secretary of each Corporate member and to the Chairman of the Constitution and By-laws Council. Any such amendment or repeal shall require for adoption the affirmative vote of two-thirds of the members of the Board of Governors. No enactment, repeal or amendment of the By-laws of the Association shall be enforced or acted upon until the approval of the Minister of Consumer and Corporate Affairs has been obtained.

Section 3

ENACTED By the Board of Governors this _____ day of _____, 1983.

1. [1. **Introduction**](#)
 2. [2. **Background**](#)
 3. [3. **Methodology**](#)
 4. [4. **Results**](#)
 5. [5. **Conclusion**](#)
 6. [6. **References**](#)
 7. [7. **Appendix**](#)
 8. [8. **Supplementary Materials**](#)
 9. [9. **Notes**](#)
 10. [10. **Abbreviations**](#)
 11. [11. **Conflicts of Interest**](#)
 12. [12. **Acknowledgments**](#)
 13. [13. **Author Contributions**](#)
 14. [14. **Data Availability Statement**](#)
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 154. [154. **Abbreviations**](#)
 155. [155. **Conflicts of Interest**](#)
 156. [156. **Acknowledgments**](#)
 157. [157. **Author Contributions**](#)
 158. [158. **Data Availability Statement**](#)

03/83

DENTAL MATERIALS & DEVICES

REPORT OF THE CDA COUNCIL ON DENTAL MATERIALS AND DEVICES TO THE 1983 ANNUAL BOARD OF GOVERNORS MEETING

Members: Dr. R.Y. Barolet, Quebec City, Chairman
Dr. P.C. Desautels, Montreal, Que.
Dr. J.M. Gourley, Corner Brook, Nfld.
Dr. L.N. Johnson, London, Ont.
Dr. D.W. Jones, Halifax, N.S.
Dr. R.H. Roydhouse, Vancouver, B.C.
Dr. D.C. Smith, Toronto, Ont.
Dr. P.T. Williams, Winnipeg, Man.

Executive

Liaison: Dr. J. Robertson, Summerside, P.E.I.

1. Council Meeting

A two day Council meeting took place at the Ottawa headquarters on May 26-27, 1983 since the last report to the 1983 Interim Board of Governors meeting held in Ottawa.

Business Requiring Board Action

2. CDRF Award

As is the custom, the Council has reviewed via its CDRF Committee five submissions for consideration for the CDRF Award. Based on the referees evaluations of these submissions,

RESOLVED:

83.36 *THAT Dr. C.A.G. McCulloch of the University
of Toronto be awarded the 1983 CDRF Award
for his paper on "Cell Migration in the
Periodontal Ligament of Mice".*

ADOPTED

For the information of the Governors, a listing of all the submitters along with their supervisors and the titles of their papers are shown below.

2. CDRF Award - continued

<u>Author</u>	<u>Supervisor</u>	<u>Title</u>
D. Parisis, M.Sc.	E.T. Pritchard, Univ. of Manitoba	Hydrolysis of the Flavonoid Glycoside Rutin to its Genotoxic Aglycon Quercetin by Human Oral Streptococcal Isolates : An Example of a Possible Involvement of the Oral Microflora in Intra-Oral Carcinogenesis.
H.C. Tenenbaum, Ph.D	J.N.M. Heersche, Univ. of Toronto	Differentiation of Osteoblasts and Formation of Mineralized Bone in Vitro
T.D. Daley, M.Sc.	D.A. Gardner,	The Canalicular Adenoma, an Intraoral Salivary Gland Neoplasm: Its Significance to the Dental Profession.
G.A.G. McCulloch, Ph.D	A.H. Melcher,	Cell Migration in the Periodontal Ligament of Mice.
J.W.C. MacDonald, M.Sc.	A.G. Hannam,	The Relationship between Artificial Occlusal Contacts and Jaw Closing Muscle Activity During Tooth Clenching.

For information purposes, the criteria used to select the CDRF Award winner is presented. Two referees are asked to give their opinion on the quality of the work submitted. Specifically they evaluate the submissions on:-

- a) Familiarity of the applicant with the previous and current literature on the subject.
- b) Methodological and technical approaches to the subject.
- c) The scientific value of the work and its contributions to the advancement of knowledge in the field, and
- d) The originality of the subject.

2. CDRF Award - continued

All graduate students working on masters or doctorate programmes at Canadian dental schools are invited to submit for the Award. Last year, forty-five graduate students were individually invited to participate in this activity.

3. CDA/CSA Certification Program

Based on the decisions taken at the last Board of Governors meeting, discussions have taken place with the Canadian Standards Association to plan what further actions will be required to implement the Certification Program.

A letter of understanding between CDA and CSA was reviewed and decisions were made on the make-up of the CDA Advisory Panel required to grant the CDA mark of approval, on the time delays that would be necessary for processing the information supplied to the members of the advisory panel. After review of the letter of understanding and the deletion of one item,

RESOLVED:

83.37

THAT the CDA through its Executive sign the agreement with the CSA for the implementation of a Dental Materials Certification Program operated by the CSA on behalf of the CDA as outlined in the amended Letter of Understanding, dated January 11, 1983, and with the further understanding that no CDA funds will be required to initiate or maintain this program.

APPENDIX I

ADOPTED

Such a program is usually self-sufficient as far as funding is required when it is in operation. However initial start-up costs are required to get such a program operational. Such items as initial consumable testing equipment for two university set-ups, publicity, general organization and travel expense must be obtained. It was estimated that such start-up expenses could reach \$50,000. Possibilities of obtaining such funding from the Federal Government are being explored and correspondence to the Minister of National Health and Welfare from the CDA President has taken place. However, if such funding is not forthcoming or is delayed, the program could be placed in jeopardy. Also if CDA could supply some seed money, this would show the government funding agencies that such a program has a very high priority in our profession.

CDA/CSA Certification Program - continued

Accordingly, Council recommended:

WHEREAS the Council on Dental Materials and Devices considers the implementation of a Certification Program imperative and further to facilitate funding from governmental granting agencies, it was resolved:

THAT the CDA assume responsibility for financing the costs of the initial phase of the certification program up to a limit of fifty thousand dollars (\$50,000) and that CDA actively seek, in collaboration with the CSA, additional funding from government and other sources for a full certification program comparable to the programs currently existing in other countries.

DEFEATED

Note: The Board of Governors disagrees. This can be considered when the Federal Government makes the program mandatory and when additional sources of funding are identified.

Canadian Standards Association has requested that CDA increase its support funding for the Standards Program. Generally the Council felt that CSA costs to prepare Canadian Standards seem to be quite high because they were carrying full overhead costs. Since most of the effort required for the preparation of the standards is done by the CDA Council members the Council unanimously agreed that the CSA proposal for increased support funding was unacceptable.

RESOLVED:

83.38

THAT CDA grant \$8,400 to the CSA for the dental standards writing program for the fiscal year 1983/1984 subject to a more detailed accounting of expenditures for 1982/1983 which is acceptable to the Executive Director of the CDA and to an agreed program of work for 1983/1984 and further

THAT any continuance of this grant to the CSA be contingent on submissions of detailed programs of work and accounting of expenditures acceptable to the CDA.

ADOPTED

\$. Symposium "The Use of Mercury and Amalgam in Dentistry"

A special one-day meeting under the direction of Dr. Derek Jones was held on the subject. The meeting was the result of a request from a governor of the Board (Dr. Roach) last year to investigate some literature he had received on the possible toxicity of dental amalgam when used as a restorative material.

Much literature was gathered and most of the experts on the subject met in Ottawa to discuss this topic. The discussions that took place centered on the following topics:-

- a) Status of amalgam as a filling material
- b) The status and significance of mercury toxicological literature
- c) The toxic hazard to the patient
- d) The toxic hazard to the dental assistant and the dentist
- e) The long term risks and potential for genetic effects
- f) Alternative substitutes for amalgam

Based on the discussions, a statement on the Use of Mercury and Amalgam in Dentistry was prepared and is appended.

APPENDIX II

RESOLVED:

83.39

*THAT the statement prepared by the
Ad Hoc Committee of the Council on
Dental Materials and Devices on the
Use of Mercury and Amalgam in
Dentistry be approved.*

ADOPTED

It is the wishes of the Council that the approved statement be published in the Journal so that all our members can be informed on this matter.

Items for Board Information

5. Status Reports

A status report entitled "What's New in Endodontics?" was sent to the Journal for publication.

Respectfully submitted

R.Y. Barolet
Chairman,
Council on Dental Materials and
Devices.

ADOPTION OF REPORT

The Board accepts the report of the Council on Dental Materials and Devices with thanks.



178 Rexdale Blvd., Rexdale (Toronto), Ontario, Canada M9W 1R3 Telex 06-989344

January 11, 1983

Mr. H.E. Drouin,
Executive Director,
Canadian Dental Association,
1815 Alta Vista Dr.,
Ottawa, Ont.
K1G 3Y6

Subject: Proposed Agreement

Dear Mr. Drouin:

On your acceptance of the terms and conditions specified herein, this letter will constitute the Agreement between the Canadian Standards Association ("CSA") and the Canadian Dental Association ("CDA") for our proposed Dental Materials Certification Program.

- (1) CSA will establish and promote, with the co-operation of the Canadian Dental Association ("CDA"), a Certification Program for Dental Materials.
- (2) The standards being proposed for inclusion in the voluntary Certification Program are:

(Cont'd...2)

CC21/1/j1

Mr. H.E. Drouin

January 11, 1983

CAN-2349.3-M81	Dental Mercury
CAN-2349.4-M80	Dental Inlay Casting Wax
CAN-2349.5-M80	Dental Casting Gold Alloys
CAN-2349.6-M82	Alginate Dental Impression Material
CAN-2349.16-M82	Alloys for Dental Amalgam

Other standards in the Dental Field are being proposed for inclusion in the program at a future date.

(3) CSA will administer the Certification Program on behalf of the CDA.

(4) In reference to (3), CSA will:

- : Contract with competent testing laboratory facilities as per CSA Certification Division operating procedures to perform the relevant certification testing and re-examination testing as prescribed in the appropriate CSA standard.
- : Issue on behalf of the CDA a Certification Notice to the Dental Community, advising the interested parties of the existence of the Certification Program.
- : Issue any subsequent Certification Notices and Bulletins detailing revisions to the standards and the procedures necessary for compliance for submitters.

(Cont'd.....3)

CC21/2/nc

Mr. H.E. Drouin

January 11, 1983

- : Collect all fees for services rendered by CSA from submitters. The Testing Laboratory(s) will be reimbursed for services by CSA under terms mutually agreeable to CSA and the Testing Laboratory.
- : Provide members of the CDA Advisory Panel with a copy of the final report after the submitter has agreed to all the requirements for compliance, including any monitoring and compliance assurance procedures deemed necessary.
- : Issue a letter of certification on behalf of the CDA giving permission to the submitter to use the CDA Mark after the Advisory Panel Chairman has approved the report.
- : Request the submitter to sign a Service Agreement detailing the responsibilities and privileges of CDA, CSA and the submitter.

It is understood that the CDA will:

- (1) Co-operate actively in the establishment and promotion of a Certification Program for Dental Materials.

(Cont'd.....4)

Mr. H.E. Drouin

January 11, 1983

- (2) Liaise with the CSA so that Press Releases and Notices in the Professional Journals may also be issued when desirable.
- (3) Grant CSA the right to grant the submitter a non-exclusive licence to use the CDA Mark on the Material manufactured by or for the submitter in accordance with the Service Agreement.
- (4) Establish a CDA Advisory Panel to which CSA will refer problems that are outside CSA's present sphere of expertise and to give final approval on product submitted for certification.
- (5) In reference to (3), the CDA Advisory Panel Chairman shall advise CSA of its decision within 20 working days of receipt of the final report.
- (6) Sign the Service Agreement detailing the responsibilities and privileges of CDA, CSA and the submitter.

(Cont'd.....5)

Mr. H.E. Drouin

January 11, 1983

Agreement may be terminated by either party, at the end of a negotiated period after notification, however, such period shall not be less than six months. Such negotiations will take into account any commitments undertaken by the CSA or CDA in terms of personnel and equipment.

Should you have any questions regarding the above, please feel free to contact me at (416) 744-4378.

Yours truly,

John Wolfe,
Manager,
Health Care Technology Program,
Certification Division.

Canadian Dental Association
Understood and Agreed

By: _____

Date: _____

Witness: _____

Report of a Symposium on "The Use of Mercury and Amalgam in Dentistry"
- Council on Dental Materials and Devices of CDA, May 27, 1983.

AN ENDORSEMENT FOR THE USE OF SILVER COPPER AMALGAM
AS A RESTORATIVE MATERIAL

Practitioners from various parts of Canada have brought to the attention of the Canadian Dental Association concerns expressed by a few members of the general public about possible side effects which may be associated with the use of dental silver amalgam as a restorative material.

An Ad Hoc Committee of the Council on Dental Materials and Devices of the C.D.A. met on May 27, 1983. After a review of the literature and from discussions in the Committee and within the professions, there appears to be a very small number of persons showing probable amalgam sensitivity. The number when accurately documented, is very low compared to the vast number of amalgam restorations that have been placed.

Amalgam has been generally accepted by the dental profession for the past 80 years or so. Although some concerns have been occasionally expressed about its use, such concerns have not been supported by scientific evidence. During the past five years, various laboratory and clinical trials have demonstrated the superior clinical performance and stability of the newer formulations of alloys for amalgam. These improvements are the result of original Canadian research (Innes and Youdelis, 1963) and of the development of improved handling techniques. When a restoration is required, amalgam is still the material of choice for restoring the majority of decayed posterior teeth.

The individual patient is exposed to mercury from a variety of sources such as industrial pollution, paint, smoking and diet. Exposure from amalgam fillings has not been demonstrated to

be greater or more harmful than that arising from other minor background sources. Research and clinical experience has shown that sensitivity to some metals may occasionally be a possible source of a dental patient's problems; mercury is only one of these metals; the amount of mercury absorbed as a result of having an amalgam restoration placed is very small and is less than the amount obtained from certain diets and the environmental effects of modern life.

In the light of present knowledge, the Canadian Dental Association's Council on Dental Materials and Devices agrees with the following statement released by the American Dental Association, "Except in individuals sensitive to mercury, there is no reason why a patient should seek to have amalgam restorations removed." (J. Amer. Dent. Assoc. 106, 519-520, 1983.)

Dentistry must be concerned, however, about keeping to a minimum the absorption of any foreign substances involved in dental treatment. The Canadian Dental Association's Council on Dental Materials and Devices strongly advocates the use of the most corrosion-resistant alloys, the use of the recommended alloy/mercury ratios, the use of rubber dam to control and collect all debris together with the efficient use of high-speed evacuation systems by the dental assistant, and the rigorous implementation of the CDA mercury hygiene recommendations (1979). It should go without saying that the removal of existing amalgam should only be performed with water spray and high-speed evacuation. Cutting amalgam dry has been shown to be a primary source of mercury for both dental personnel and patients.

Council encourages controlled clinical research studies involving individual patients considered to be sensitive to dental amalgam in order that a sound scientific basis be established for reaction to such restorative materials. Such controlled studies would require an assurance that patients had not swallowed or ingested amalgam debris during placement of any fillings, the age

and composition of the filling should be known; and there should be an assurance that the alloy/mercury ratio and the method of placement were acceptable.

The Council on Dental Materials and Devices strongly endorses the principle that clinical treatment of suspected mercury sensitive individuals should not depend solely upon the dentist's diagnosis, but should always include an assessment by a qualified dermatologist or allergy specialist. Testing for metal sensitivity is not a simple matter and does require expert interpretation.

In conclusion, it should be pointed out that no wide spread sensitivity to mercury among dentists and dental personnel, who may be exposed to much higher levels of mercury absorption, has been established. In a sense, the members of the dental profession themselves could be regarded as a comparative test group who have been exposed to low levels of mercury over long periods of time. The possible hazards to dental personnel arising from exposure to mercury vapour in the dental office have been well documented (Jones et al, 1983) and dentists should ensure that the recommended working procedures are followed to minimize any risk.

Update July 12, 1983

References

- American Dental Association Council on Dental Materials, Instruments, Equipment Council on Dental Therapeutics. "Safety of Dental Amalgam," J. Amer. Dent. Assoc., 106, 519-520, 1983.
- CDA Council on Dental Materials and Devices "Hazards of Mercury Contamination in Dental Practice." J. Cand. Dent. Assoc., 7, 320, 1979.
- Innes, D. B. K. and Youdelis, W. V. "Dispersion-Strengthened Amalgams." J. Cand. Dental Association, 29, 587-593, 1963.
- Jones, D.W., Sutow, E. J. and Milne, E. L. "Survey of Mercury Vapour in Dental Offices in Atlantic Canada." J. Cand. Dent. Assoc., 49, 378-395, 1983.

Updated July 12, 1983

C.C. Dr. W.R. Thompson
Dr. R. Barolet



MINISTER OF NATIONAL HEALTH AND WELFARE

MINISTRE DE LA
SANTÉ NATIONALE ET DU BIEN-ÊTRE SOCIAL

OTTAWA, K1A 0K9



24 VI 1983

William R. Thompson, D.D.S.,
President,
Canadian Dental Association,
1815 Alta Vista Drive,
OTTAWA, Ontario.
K1G 3Y6

Dear Dr. Thompson:

Thank you for your letter of May 27, 1983, regarding standards for dental devices. I am pleased to learn of your Association's efforts to promote the safety and effectiveness of dental products.

All devices marketed in Canada are subject to the provisions of the Food and Drugs Act and Medical Devices Regulations. Basically, the Health Protection Branch of my Department, relies on three procedures for fulfilling our responsibilities relating to devices. These are:

- (a) premarket review;
- (b) corrective actions for products found to be hazardous or ineffective; and
- (c) establishment of mandatory standards.

With the very large number and variety of devices on the market, priorities have to be set and decisions taken on which procedure should be applied to any particular class of product. Devices which merit the highest priority are usually subject to premarket review.

... 2

William R. Thompson, D.D.S.

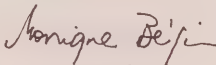
Since April 1, 1983, all new dental implantables are subject to premarket review. For these, manufacturer's test data to establish the safety and effectiveness of a product are reviewed and if found acceptable, a Notice of Compliance is issued. Manufacturers are at liberty to refer to such Notices of Compliance in the labelling of their products. We periodically issue Information Letters listing the products which have received Notices of Compliance. Test data for implantables on the market prior to April 1, 1983, will be reviewed as necessary.

In addition to this major step, the Health Protection Branch has for many years, responded to all device related problems reported by dentists or others. Such communications help us to set priorities and lead to corrective actions such as recalls, suspension of sales, product modifications, or issuing of Medical Devices Alerts. Several Alerts have been issued on dental devices and hazards.

I am willing to review the need for mandatory standards for dental devices not now subject to premarket review and would suggest that you arrange to meet Dr. A.B. Morrison, Assistant Deputy Minister, Health Protection Branch, to discuss this and other related issues. Dr. Morrison's telephone number is 992-2441. You will realize, of course, that the extent of our actions will depend on resource considerations and priorities.

Please be assured of my continuing support for our common objectives.

Yours sincerely,


Monique Bégin

COUNCIL ON EDUCATION

REPORT OF THE CDA COUNCIL ON EDUCATION TO THE 1983 ANNUAL CDA BOARD OF GOVERNORS

Members: K.C. Bentley, Montreal, Chairman
N.H. Andrews, Halifax
G.S. Beagrie, Vancouver
I.C. Bennett, Halifax
M.A. Boyd, Vancouver
G.W. Burgman, Kirkland Lake
E. Busvek, Toronto
M. Jahjah, Montreal
N.J. Layton, Truro
E.W. McIntyre, Edmonton
G.W. Myers, Edmonton
K.F. Pownall, Toronto

Auxiliaries' Representatives:
Mrs. M. Miller, Winnipeg - CDHA
Mrs. M. Paquin, Vancouver - CDAA

Executive Liaison:
D.L. Thompson, Calgary

Also in attendance were Dr. M. Santangelo, A.D.A. Representative, Chicago; Dean R.I. Brooke, London, Ontario; Dean A. Schwartz, Winnipeg; Dr. G. Kravis, Registrar, N.D.E.B.; and Col. J.M.A. Donely, C.F.D.S.S. Borden. Staff members attending were Dr. J.V.P. Chatwin, Director of Accreditation; Mrs. T. Appelt, Council Secretary; Ms. L. Teteruck, Director of Education.

1. Council Meeting

The Council on Education met on May 19 and 20, 1983 in Ottawa. Immediately preceding this meeting, Committee No. 1 met on the afternoon of May 18 and Committee No. 2 met on the morning of May 18. The closed session of Council was held on May 19, and the open session on May 20.

COUNCIL ON EDUCATION

2.

1. Council Meeting - continued

Committee No. 1 - Membership:

I.C. Bennett, Chairman
N.H. Andrews
G.S. Beagrie
K.C. Bentley
M. Jahjah
N.J. Layton
E.W. McIntyre
K.F. Pownall
D.L. Thompson
E. Busvek

Committee No. 2 - Membership:

G.W. Myers, Chairman
K.C. Bentley
M. Boyd
G.W. Burgman
E. Busvek
M. Miller
M. Paquin

Committee No. 2 - Dental Admissions Test Committee - Membership:

M. Boyd, Chairman
I.C. Bennett
G.W. Thompson
D. Banting
J.W. Graham, Consultant
L. Graham, Consultant
J. Krupka, Consultant

(1) Dental Admissions Test Committee

A very comprehensive report was received from Dr. Marcia Boyd, Chairman of the Committee (Appendix I). The budget contained in this report is included in the overall Council Budget. Dr. Bennett presented results of a survey on test writers, new and repeat, a copy of which is appended to the report. While there has been a decline in the number of applications, it has not been nearly as significant in Canada as it has been in the United States. Recommendations were approved by Council as follows:

(1) D.A.T. - continued

1. Dr. Boyd be reappointed as Chairman for another term.
2. Dr. Gordon Thompson be appointed as Consultant to the D.A.T. Committee.
3. Dr. J. Krupka and Mrs. L. Graham be reappointed as consultants to the Interview Validation Study Project for a one year period beginning September, 1983.
4. Dr. J. Graham be reappointed as a Consultant to the D.A.T. Committee for a one year term beginning September, 1983.

RESOLVED:

- 83.40 a *THAT the Dental Aptitude Test fee be increased from \$50.00 to \$55.00 commencing in November, 1983.*

ADOPTED

- 83.40 b *THAT the test administrators fee for groups to 50 candidates be increased from \$50.00 to \$60.00.*

ADOPTED

Council wishes to record appreciation of the work done, and the detail in which it has been done, by Dr. Marcia Boyd and her Committee.

(2) Continuing Education Committee

In the absence of the Chairman, Dr. Williamson who was unable to be present, Dean Beagrie presented a verbal report. No meeting of the Committee has taken place since the last meeting of Council.

It was proposed that the Continuing Education Committee meet at the time of the CDA Convention in September. Council agrees with this proposal and will await the report from the Continuing Education Committee.

(3) Teaching Conference

The report on the 1982 Teaching Conference, "Teaching of Oral Pathology in the Undergraduate Dental Curriculum", was received. Council recommends that this report be distributed to the Faculties of Dentistry for information.

The topic of the 1983 Teaching Conference is "Teaching of Dental Practice Management" and will be chaired by Dr. R.L. Ellis.

A recommendation was received from the Association of Canadian Faculties of Dentistry for the 1984 Teaching Conference.

RESOLVED:

- 83.41 *THAT the 1984 Teaching Conference topic be "Dental Biomaterials" and that Dr. Dennis Smith be invited to chair the conference.*

ADOPTED

A suggestion was made that the teaching of implantology might be considered a suitable topic for a future Teaching Conference. This generated much discussion and the following resolution put forth:

- RESOLVED: THAT whereas concern is expressed regarding the application of unproven clinical treatment methods, the Council on Education recommends to the Board of Governors that CDA develop a policy statement which will define these methods of treatment and will delineate restrictions which should apply when they are carried out.

DEFEATED

- 83.42 *Executive Council Comment: Disagrees but will continue to encourage the development of status reports and guidelines.*

ADOPTED

(4) Reports

Council received reports from the following organizations with thanks:

(4) Reports - continued

- a) National Dental Examining Board of Canada
- b) Royal College of Dentists of Canada
- c) Association of Canadian Faculties of Dentistry
- d) Canadian Dental Hygienists' Association
- e) Canadian Dental Assistants' Association
- f) Council on Student Affairs
- g) Canadian Fund for Dental Education
- h) National Cancer Institute

Although the CDA representative to NCI, Dr. D.G. Gardner, was not present, attention was drawn in his report to the number of clerkships available to dental students as compared to medical students. There are two clerkships available for each medical school, whereas there are only three clerkships for dental students in all ten dental schools.

Council is concerned about this serious paucity of clerkships for dental students and NCI will be so informed.

(5) Surveys

A list of institutions requesting surveys of their programs during the 1983/84 academic year was received and approved.

Criteria for Selection of Surveyors

It has been demonstrated that the present guidelines concerning the eligibility to serve on a survey team in so far as it relates to a representative from a licensing board not ever having had any association with the University under survey have caused problems.

Council believes that representation from the licensing board is important.

RESOLVED:

83.43

THAT the present policy be amended to permit a representative from the licensing board who may have had some association with the University, but not within the past 10 years, to serve on a survey team is deemed necessary by the Chairman of Council.

ADOPTED

(5) Surveys - continuedAuxiliary Accreditation

There was lengthy discussion on this subject and the fact that at the present time CDA surveys only the traditional duties of auxiliary programs. In the U.S.A., ADA surveys all components of auxiliary programs.

RESOLVED:

83.44

THAT it be recommended to the Board of Governors that the Council on Education be authorized to survey all components of auxiliary programs in Dental Assisting and Dental Hygiene in those provinces where the dental licensing board has the jurisdiction to license or register such auxiliaries when required and where the instruction program complies with what is permitted by that province's dental licensing board.

ADOPTED

Quebec Dental Hygiene Programs

Consideration was given to lifting the moratorium on dental hygiene program accreditation in Quebec.

At the request of the Quebec representative to the Board of Governors, the motion was tabled as follows:

83.45

THAT the Council on Education recommends to the Board of Governors that the moratorium on dental hygiene program accreditation in Quebec be lifted to permit the survey of dental hygiene programs for traditional duties only since the accreditation status of five programs will expire in June, 1984.

MOTION TO TABLE:

THAT the above motion be tabled until the Interim Board of Governors meeting in April, 1984.

ADOPTED

(5) Surveys - continued

Survey of Programs 1982/83

Programs were accredited for the following:

Université Laval
Undergraduate Dental Program

University of Toronto
Undergraduate Dental Program

University of Western Ontario
Graduate Program in Oral Pathology

Keewatin Community College
Dental Assisting Program

Malaspina College
Dental Assisting Program

Northern Alberta Institute of Technology
Dental Assisting - Independent Study
Program

Red River Community College
Dental Assisting Program

(6) Ontario Council of Regents

Correspondence was received from the Ontario Council of Regents in which questions were posed of the Council with respect to accreditation. Council prepared a reply to these questions for transmittal.

(7) Ad Hoc Committee on Documentation

An ad hoc committee consisting of the Chairman of Council and the Chairmen of Committees No. 1 and No. 2 presented a progress report on the review of minimum requirements: Review of all documentation relating to accreditation requirements is being carried out.

(8) Ad Hoc Committee - Pre-Licensure Period

Council approved the formation of an ad hoc committee comprised of Dr. G. Beagrie, Chairman, and members, Dr. K.C. Bentley, Dr. J.P. Lussier and Dr. N. Layton to investigate the matter of a mandatory prelicensure period following graduation from a dental undergraduate program.

(9) Terms of Reference - Council on Education

A draft of the terms of reference for the Council on Education was reviewed. Several additions and amendments were made and the following motion was submitted.

THAT the draft of the terms of reference of the Council on Education be forwarded to the Board of Governors for incorporation in the Bylaws of the Canadian Dental Association.

DEFEATED

83.46

Executive Council comment: Executive Council disagrees due to Council's acceptance of the revised terms of reference contained in the report of the Ad Hoc Committee on Hospital Services. This report contains many of the recommendations.

The Terms of Reference for the Council on Education will be considered by the Ad Hoc Committee on Hospital Services.

ADOPTED

COUNCIL ON EDUCATION

9.

(10) Nominating Committee

The following nominations were approved by Council.

- | | |
|---------------------------------------|-----------------------|
| 1. DAT Committee | - Dr. A. Vaillancourt |
| Chalk Grading Team | - Dr. J. Braun |
| | - Dr. K. Sutherland |
| 2. Continuing Education | - Dr. D.V. Chaytor |
| 3. Council Representative to N.D.E.B. | - Dr. G.S. Beagrie |
| 4. Nominating Committee | - Dr. N. Andrews, |
| | Chairman |

(11) Summary

Council continues to recognize and carry out its responsibilities and all material relating to existing guidelines and documentation is being reviewed to ensure that material is current.

Council wishes to recognize the valuable contribution made over the past six years by Dr. G. Myers; he has been an enthusiastic and effective member of Council. Council also wishes to commend once again Mrs. Thora Appelt for her dedication to the work of Council.

Finally, Council extends sincere appreciation to Dr. Vic Chatwin on the occasion of his planned retirement from the position of Director of Accreditation and commends him for the excellent manner in which he has discharged the duties of this position.

Respectfully submitted,

Kenneth C. Bentley,
Chairman.

ADOPTION OF REPORT:

The Board accepts the report of the Council on Education with appreciation.

REPORTDENTAL ADMISSION TEST COMMITTEECOUNCIL ON EDUCATIONCANADIAN DENTAL ASSOCIATION1982-83MEMBERS

Dr. M. Boyd, Chairman, 1985 (3)
 Dr. D. Banting, 1984 (1)
 Dr. I.C. Bennett, 1985 (2)
 Dr. G.W. Thompson, 1983 (3)
 Dr. J. Graham, Consultant, American Dental Association
 Dr. J. Krupka, Consultant, Michigan State University (Interview
 Validation Study)
 Mrs. Linda Graham, Consultant, American Dental Association (Interview
 Validation Study)
 Dr. D.L. Thompson, Executive Council Liaison

* Dates indicate termination of appointment, brackets, number of terms.

The Committee has met twice since the last meeting of Council - on
 October 24, 1982 and December 10/11, 1982.

1. REPORT ON THE 1982-83 TEST SESSION

<u>(a) Numbers Tested</u>	<u>(b) Reports Sent to Dental Schools</u>
1966-67 - 818	1966-67 - 2,775
1967-68 - 880	1967-68 - 2,908
1968-69 - 1,099	1968-69 - 3,339
1969-70 - 1,093	1969-70 - 3,181
1970-71 - 1,242	1970-71 - 4,095
1971-72 - 1,521	1971-72 - 5,004
1972-73 - 1,912	1972-73 - 6,008
1973-74 - 2,022	1973-74 - 5,427
1974-75 - 2,346	1974-75 - 6,935
1975-76 - 2,087	1975-76 - 5,289
1976-77 - 1,732	1976-77 - 4,791
1977-78 - 1,601	1977-78 - 4,498
1978-79 - 1,501	1978-79 - 4,209
1979-80 - 1,408	1979-80 - 4,065
1980-81 - 1,531	1980-81 - 4,151
1981-82 - 1,511	1981-82 - 4,524
1982-83 - <u>1,611</u>	1982-83 - <u>4,800</u>
TOTAL 25,915	TOTAL 75,999

2. DENTAL APTITUDE TEST PROGRAM

(a) Test Numbers

During the 1982-83 academic year, the DAT Program tested 1611 students. The previous year, the Program tested a total of 1511 students, thus representing a 6.6% increase in applicants.

Pursuant to the motion passed at the last meeting of the Council on Education that the DAT Committee carry out an investigation on the number of applicants for the DAT and its effect on the calibre of future dental students and dental practitioners, the Committee is pleased to state that a study has been undertaken under the direction of Dr. Ian Bennett of Dalhousie University.

Dr. Bennett has analyzed the number of first time applicants versus repeat candidates for the DAT examination from 1976 to the present, the results of which are appended to this report. In addition, a questionnaire is under development to further investigate this issue and will be reviewed at the May DAT Committee meeting.

Drs. Bennett and Boyd will report further on their findings and future direction at the Council meeting.

(b) Test Content and Sequence

As in previous years, the DAT test consisted of the following examinations in two basic areas of assessment - academic and manual, with the following examinations in each area:

- Academic - Reading Comprehension (English language students only);
- Biology and Inorganic Chemistry
- Manual - Chalk Carving
- Perceptual Ability in Two and Three Dimensions

In addition to the above examinations, the 16 Personality Factors examination was, once again, included in the testing battery to be used for research purposes only and not communicated to the dental schools.

(c) Testing Dates

The DAT Program tested twice during the 1982-83 academic year - on November 12/13, 1982 and March 4/5, 1983.

(d) Scoring of Answer Sheets

Once again, the DAT Program utilized the services of the American Dental Association in the grading of the Aptitude Test. The cost of this service remains proportional to the fees collected.

(e) Reporting of Scores

The manner of reporting test scores remained the same as last year with the following categories reported:

- Reading Comprehension
- Biology
- Inorganic Chemistry
- Science Average
- Academic Average
- Perceptual Ability
- Carving Dexterity

For the first time in November 1982, the American Dental Association undertook the final printing and reporting of test scores, thus eliminating our dependence upon additional computer services in Ottawa.

Total costs remain similar to that previously incurred under dual computerization.

Both the dental faculties and students continue to receive an individual report of scores, in addition to which the dental faculties receive a master printout for all test applicants.

We also report, for each applicant, his/her preferred province of residency for purposes of application to dental school.

(f) Committee Membership(i) Dental Admissions Test Committee

Committee membership remained the same in 1982-83.

The Committee notes with regret, however, the termination of appointment of Dr. G.W. Thompson who has served on the DAT Committee for a number of years and has provided invaluable assistance to the Program.

The termination of Dr. Thompson's appointment to the Committee initiated a general discussion by the DAT Committee on the issue of Committee membership and continuity of membership.

The Committee expressed deep concern about continuity of membership, particularly as it relates to the continuation and completion of many of the Committee's ongoing research projects.

Consequently, the Committee asks the Council on Education to consider the following two recommendations:

(f) Committee Membership(i) Dental Admissions Test Committee (Cont'd.)

- (1) To appoint Dr. Alain Vaillancourt, Dean of the Faculty of Dentistry, University of Montreal, to fill the present Committee vacancy;
- (2) To consider expanding Committee membership and/or expanding the role of consultants to the Committee to facilitate continuity of membership and the completion of ongoing research projects.

(ii) Consultants

As you will recall, last year the Committee initiated a policy whereby it would assess the role of consultants on a yearly basis and make the appropriate recommendations to Council for ratification and approval. With this in mind, the following recommendations are made:

Be it resolved

That Dr. J. Krupka and Mrs. Linda Graham be reappointed as consultants to the Interview Validation Study Project for a one-year period beginning September 1983.

It was further recommended that Dr. J. Graham be reappointed as a consultant to the DAT Committee:

Be it resolved

That Dr. J. Graham be reappointed as a consultant to the DAT Committee for a one-year term beginning September 1983.

(iii) Chalk Grading Team

Further to the Committee's recommendations to the Council on Education meeting last May, several changes have occurred regarding the composition of the DAT Chalk Grading Team.

Two members of the team ended their terms in 1982, (from the Université de Montréal and the University of Western Ontario). Two more will end their terms in 1983 (from the University of Toronto and McGill University), two in 1984 (from the University of Alberta and the University of Western Ontario) and three in 1985 (from Dalhousie University, Université Laval and the Chairman). At each interval, new

(f) Committee Membership(iii) Chalk Grading Team (Cont'd.)

representatives will be appointed with consideration being given to those schools not presently represented on the Grading Team.

Since Manitoba and Saskatchewan have no representatives on the Team, they have been approached to provide a representative once a vacancy occurs. Dr. Jack Braun has been recommended from the University of Manitoba, Dr. Ken Sutherland from the University of Saskatchewan.

Attendance at any one meeting will be decided upon by the number of chalks being graded with one grader for every 150 chalks to be marked.

This new system was initiated in March 1983 and appears to work well.

(g) Purchase of New Test Supplies

During 1982-83, the Committee was fortunate to obtain the services of Dalhousie University for production of a new supply of chalk for the carving examination.

Under the direction of Dr. Derek Jones, Dalhousie University was able to provide the testing program with 2500 pieces of chalk. In addition to this supply, Dr. Jones also was able to provide alternate samples of chalk for consideration in future years.

The Committee is very appreciative of the assistance provided the DAT Program by Dr. Jones, Dr. Bennett and the Faculty of Dentistry at Dalhousie University.

(h) Special Test Session for Sabbath Observers

The Committee continues to provide special accommodation for students who wish to be tested on a day other than Saturday. In both November 1982 and March 1983, a special session was held at CDA Headquarters for those students from Toronto, Montreal and the eastern United States who wished to take the examination at a special session.

(i) Student Information Questionnaire

The DAT Student Information Questionnaire continues to be an integral part of the DAT Program and students are requested to complete this information during the test session. Group data has been tallied for the November 1981 and March 1982 test periods and will be used in the development of a Committee article for publication in the CDA Journal in the future.

(j) Chalk Grading Procedures

Commencing in November 1982, the Chalk Grading Team undertook a new grading procedure for the chalk carving examination. In previous years, a three-point criteria had been used. Commencing last November, a four-point criteria was used with each chalk graded on a total twelve-point scale. The four categories of assessment are:

- (1) accuracy and complete reproduction with respect to measurement and design;
- (2) degree to which the surfaces are flat and smooth;
- (3) degree to which the angles are clean cut;
- (4) degree to which the carving is symmetrical and correctly oriented as in the drawing and description provided.

The Committee felt that this was a more precise method of grading and that it more accurately discriminated performance levels between applicants. Greater emphasis has been placed on completion, symmetry and orientation than in previous years.

(k) DAT Preparation Materials

In conjunction with the new criteria which graders had adopted last November, the DAT Program published with the DAT materials to test applicants, expanded information on the chalk carving examination and the criteria for evaluation.

Not only were students provided with a sample chalk carving exercise and the grading criteria, but also a guide to the scoring of the carving exercise, and terminology and illustrations of common errors.

(l) Chalk Graders' Manual

Similarly, the DAT Committee prepared for each Chalk Grader, a reference handbook. This manual contains the terms of reference of the Chalk Grading Team, the grading criteria, a list of the current Committee members, the chalk carving grading/discrimination criteria, the sample materials provided all DAT applicants, a sample examination and the DAT explanation brochure. The DAT Committee feels that this is an excellent orientation package for all chalk graders particularly because of the new grading criteria which has just recently been instituted.

3. DENTAL APTITUDE TEST PROGRAM 1983-84

(a) Test Dates

The following dates have been selected for the remainder of 1983 and 1984:

November 18/19, 1983; March 2/3, 1984; November 16/17, 1984

Application deadline dates are approximately one month in advance of these testing dates.

(b) Reduction of Test Centres

The Committee reviewed its applicant numbers as they relate to the eighteen test centres presently administering the DAT examination. In an attempt to reduce costs for test administration, the Committee has eliminated one yearly test session for those centres testing fewer than five candidates (i.e. Lakehead, Windsor, Prince Edward Island). These centres will consequently test only once during any one academic year.

The Committee is continually monitoring test centre utilization and availability across the country.

(c) Meetings with Admissions Committees

Over the years, it has been the intent of the DAT Committee to hold some Committee meetings on site at a dental faculty in order to meet with its Admissions Committee and answer questions it may have about the DAT and its use in the admissions process. With this objective in mind, the Committee met with the Admissions Committee at the Université de Montréal last October in conjunction with the DAT Interview Workshop, and is scheduled to meet with the University of Toronto on May 12 in Toronto.

(d) New Test Supplies & Expanded Preparation Package

A number of new supplies are earmarked for purchase in 1983 and/or early 1984.

The Committee will once again seek a new supply of chalk from Dalhousie University, at an anticipated cost of \$2500. In addition to this new supply for testing purposes, an additional supply of chalk will be developed for release to applicants at the time of application for the examination. It is anticipated that this chalk will be incorporated in a preparation package, which would include the DAT Preparation Manual, three pieces of chalk and two knife blades. The total cost of this package would be approximately \$7.06 and it is perceived that this added cost would be added to the applicant's testing fee. (See budget, page 11.)

3. DENTAL APTITUDE TEST PROGRAM 1983-84

(d) New Test Supplies & Expanded Preparation Package (Cont'd.)

The DAT Program will also have to purchase new knife handles and blades in 1983. The previous handles have not held up as well as expected and are not able to be used for another testing year. It is anticipated that the new handles will cost approximately \$4800.00 and new blades \$1000.00.

In late 1983 or early 1984, a new supply of preparation manuals will also need to be printed. The previous supply was printed three years ago and it is felt that this supply will run out shortly. The anticipated cost for this new manual would be \$6000.00 for a three-year supply.

(e) Interview Study Symposium for U.S. Dental Schools

At the last meeting of Council, the DAT Committee requested the support of the Council on Education to hold a Conference on the Admissions Interview Process on a cost recovery basis for faculties from U.S. dental schools and other interested people.

In reviewing this project, it was the consensus of the DAT Committee that this project was both too time consuming and demanding to be undertaken at the present time. This project has been tabled for the present time.

4. VALIDATION STUDIES

(a) Chalk Carving vs PMAT and 16PF Tests

For a number of years, Dr. Gordon Thompson has been involved in the collection of the abovementioned data. This study has been completed. It is entitled The Prediction of Dental School Grades and is ready for submission to the CDA Journal for publication.

(b) 16PF Studies

Under the direction of Dr. Marcia Boyd, 16PF pre-graduation data from the University of Western Ontario, Dalhousie, Manitoba and the University of British Columbia, has been assessed and a profile developed. Retesting of the 1980 graduates at these faculties has been undertaken. An article will be forthcoming in the September 1983 CDA Journal.

4. VALIDATION STUDIES (Cont'd.)

(c) Interview Validation Study

(i) Progress to Date

As reported at Council's last meeting, the DAT Committee has proceeded with the development of a standardized interview for use in the dental admission process.

During the past three years, the Committee has developed four parallel interview forms for interchange and use by the dental faculties. The U.B.C., Alberta and Dalhousie hygiene programs have also adopted the standardized interview.

Under the direction of Dr. Judith Krupka of Michigan State University, interview workshops have been held at the University of British Columbia, the University of Alberta, University of Manitoba, University of Saskatchewan, Dalhousie University, the University of Western Ontario and the University of Montreal.

An interview workshop is scheduled to be held at McGill in April 1983.

The Committee's efforts in this area have resulted in use of the interview at the faculties at which the workshop has been held, including Université Laval, which did not hold a workshop, but sent representatives to two other sessions.

In order to keep dental faculties presently involved in the interview study abreast of interview techniques, the Committee has established a schedule of retraining workshops at two-year intervals, under the direction of Mrs. Linda Graham. Travel and living expenses for the leaders of the retraining sessions are incorporated in the interview validation study budget. The honoraria is paid by the dental faculties.

During 1982-83, retraining workshops have been held at Manitoba, Alberta, Dalhousie and Western Ontario, with in-house reviews at U.B.C. and Saskatchewan.

(ii) Interview Research

The Committee has begun its research studies on the interview instrument. Preliminary data has shown a high interrater reliability which indicates a reliable instrument.

Data is presently being collected by the Committee on those students who were interviewed and admitted to dentistry.

4. VALIDATION STUDIES

(c) Interview Validation Study

(iii) Interview Research (Cont'd.)

The Committee is presently developing a validation instrument to be used in the assessment of students, now in their clinical years, to be correlated with initial interview results.

(iii) Funding

During 1982, the interview study received strong financial support from the Canadian Dental Association. In addition, the Committee wishes to acknowledge the additional financial support it received from the Canadian Fund for Dental Education in its sponsorship of a two-day interview workshop at the University of Montreal last October.

(iv) Interview Study Resources

As more and more retraining sessions are being held across the country, the Committee finds that it requires additional resource materials for presentation to, and for the retraining of, schools' interview teams. To this end, the Committee recommends

That Mrs. Linda Graham be contracted to provide the CDA DAT Interview Study Program with an in-house review tape to be used for the 1983-84 interview review sessions.

Mrs. Graham has been requested to submit to the Committee, a written quotation on the cost of such a project, prior to approval being granted for the development of this tape.

The Committee must also proceed with the translation of all four parallel interview forms and their accompanying analyses. To date, the forms have only been partially translated.

5. COMMITTEE PUBLICATIONS

The Committee is pleased to report that two articles on the Interview Study appeared in the Journal of the Canadian Dental Association in March 1983. One article was written by Dr. W.R. Teteruck, Past Chairman of the DAT Committee on The Genesis of a National Interview Study. The second article was written by Drs. Boyd, Graham, Teteruck and Krupka titled The Development and Implementation of a Structured Interview for Dental Admissions.

6. FINANCIAL REPORT

App.II

(a) 1982

Final year-end figures for the DAT Program indicate that the revenue received from testing fees totalled \$78,351.75 as compared to a budgeted figure of \$70,000.00. This was

6. FINANCIAL REPORT

(a) 1982 (Cont'd.)

due to an increase in testing fees and a 6.6% increase in applicants from the previous year. Printing and translation costs exceeded budgeted figures due to an increased volume in the materials being printed and inflation. Costs for new test materials were also above budget due to the actual production costs for the new chalk supply. Grading costs appear somewhat lower due to non-receipt of a bill for grading from the American Dental Association.

(b) 1983 Budget

In reviewing the 1983 budget as compared to the 1982 actuals, notice should be taken of the following increases in anticipated expenditures:

The budget for printing and translation has been adjusted to be more closely in line with 1982 actuals. The budget for new test materials has increased significantly because of the anticipated cost for new chalk production for both the testing program and inclusion with the preparation materials. Rather than producing a supply of 2500 chalks, Dalhousie University is being requested to supply 10,000 chalks for the 1983-84 testing year. We also anticipate an expenditure of \$6000.00 for new knives and blades. The major expense under the interview validation study would be for the McGill Workshop in April 1983 and retraining sessions at five dental faculties. Total costs are estimated at \$10,000, the majority of which would be for travel to and accommodation at these sites.

(c) 1984 Budget

In reviewing the 1984 budget, it is anticipated that new preparation manuals will need to be printed at a cost of \$6,000.00. We will, once again, require our yearly supply of chalk and blades for the student preparation package. Interview study expenses will primarily include retraining sessions at the remaining dental schools, the development of support materials and ongoing research costs.

(d) Testing Fees

As a result of the noticeable increase in expenditures of the DAT Program particularly as they pertain to new testing materials and the student preparation materials, the Committee recommends a fee increase:

Be it resolved

That the DAT testing fee be increased from \$50 to \$55 per applicant commencing with the November 1983 testing period.

6. FINANCIAL REPORT

(e) Fee for Service for DAT Test Administrators

The Committee also has had an opportunity to review the fee for service presently offered Test Administrators, Assistant Administrators and Proctors who service the DAT Program.

In order to bring our fees more in line with other testing services, the Committee recommends -

Be it resolved

That the test administrators' fee for groups to 50 candidates be increased from \$50 to \$60.

It was noted by the Committee that this increase would not significantly alter the present budget for fee for service.

CONCLUSION

Once again, the DAT Committee has been very actively involved in both ongoing program administration and research work.

A considerable amount of Committee time has been spent on expanding the quality of information presented to students at the time of application and on improving present chalk grading procedures.

Many of our research projects have moved forward significantly, some to completion, such as Dr. Thompson's Study, others to expansion among a number of Committee members.

As always, I remain deeply indebted to each member of the DAT Committee for his/her hard work and commitment to our goals and responsibilities. In addition, I would like to express my special thanks to Linda Teteruck, Director of Education and Win Mobley for their ongoing work and support of the Program and Committee.

I also wish to express our sincere appreciation to the Canadian Dental Association for its continuing support of our activities and to the Canadian Fund for Dental Education for its interest and support in our Interview Validation Study.

Respectfully submitted by

Dr. Marcia Boyd
Chairman
Dental Admission Test Committee

CANADIAN DENTAL ASSOCIATION

D.A.T. WRITERS

(NEW AND REPEAT)

1976 - 1983

<u>TEST PERIOD</u>	<u>NEW WRITERS</u>	<u>REPEAT WRITERS</u>	<u>TOTAL</u>
JAN. 1976	879)	385)	1264)
MAR. 1976	625) 1504	198) 583	823) 2087
NOV. 1976	746)	15)	761)
MAR. 1977	595) 1341	376) 391	971) 1732
NOV. 1977	517)	117)	634)
MAR. 1978	727) 1244	240) 157	967) 1601
NOV. 1978	507)	109)	616)
MAR. 1979	608) 1115	277) 386	885) 1501
NOV. 1979	410)	119)	529)
MAR. 1980	644) 1054	235) 344	879) 1408
NOV. 1980	494)	123)	617)
MAR. 1981	656) 1150	258) 381	914) 1531
NOV. 1981	415)	112)	527)
MAR. 1982	724) 1139	260) 372	984) 1511
NOV. 1982	419)	150)	569)
MAR. 1983	714) 1133	328) 478	1042) 1611

DRAFT OF TERMS OF REFERENCE FOR THE COUNCIL ON EDUCATION

(c) Council on Education

The Council on Education shall consist of twelve members. In electing the membership of the Council the Board of Governors will assure that representation is constituted as follows:

- (1) Three members who shall be full-time active members of the faculties of Canadian Dental Schools,
- (2) Four members who shall not be full time members of the faculties of the Canadian Dental Schools,
- (3) One member from nominations by the Association of Canadian Faculties of Dentistry,
- (4) One member nominated by the Council on Student Affairs,
- (5) One member from nominations by the National Dental Examining Board of Canada,
- (6) One member from nominations by Registrars of the 10 Licensing Bodies of Canada,
- (7) One member from nominations by the Royal College of Dentists of Canada.

The Chairman, who shall be selected from the membership of Groups 1, 2, 3, 5, 6 or 7, shall be appointed by the Executive Council.

The election to Council is for a three-year term, staggered, once renewable except for the student member, who shall be elected for one year renewable. A person shall not hold more than one position on the Council or represent more than one organization or group.

In the interests of co-operation and the fostering of good relationships between the CDA and its sister organization, the Secretary of the Council on Dental Education and Commission on Dental Accreditation of the ADA, or a designate, will be invited to attend all meetings of the Council and its committees without CDA financial commitment.

In addition to the above, the Association of Canadian Faculties of Dentistry, the Council on Student Affairs, the National Dental Examining Board of Canada, the Royal College of Dentists of Canada, each Canadian Dental School, the Canadian Dental Hygienists' Association, the Canadian Dental Assistants' Association, the Canadian Forces Dental Services shall have the privilege, without Canadian Dental Association financial responsibility, of non-voting participation in the Open Sessions of the Council by one representative each.

.....2

Terms of Reference,
Page 2.

The Canadian Dental Hygienists Association and the Canadian Dental Assistants Association shall be entitled to send one representative each, with Canadian Dental Association financial responsibility, to meetings of Council, such representatives to have voice and vote in deliberations of Committee No. 2 of Council and voice but no vote in sessions of Council.

The Council on Education shall have the power to appoint committees and subcommittees as it shall deem expedient. The committee members may or may not be members of the Canadian Dental Association but the Canadian Dental Association will assume the usual financial responsibility for expenses of attendance at regular meetings of the committee.

The Council on Education may recommend to the Executive Council the appointment of consultants or advisors and recommend for employment such other personnel as is needed from within or without the membership of the Association for any purpose within its jurisdiction, providing that if such appointments involve expenditures of funds other than those already allotted to the Council they must be approved by the Board of Governors or the Executive Committee.

It shall be the duty of the Council on Education:

- (i) to give study to all matters relating to dental education. This includes dental undergraduate, dental hygiene, dental assisting, dental technology, postgraduate, graduate and continuing education.
- (ii) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to dental education.
- (iii) to evaluate the various forms of dental education and to recommend revisions to the Board of Governors when necessary.
- (iv) to accredit undergraduate, postgraduate and graduate programs in dentistry, programs in dental hygiene, programs in dental assisting and programs in dental technology and to review periodically such accreditation in accordance with requirements and standards approved by the Board of Governors.
- (v) to administer activities relating to the Dental Admissions Test.
- (vi) to approve dental internships and residencies in accordance with requirements and standards approved by the Board of Governors, when such dental internships and residencies are components of accreditable internship, residency, postgraduate and graduate programs.

Terms of Reference

Page 3

- (vii) to develop guidelines and make recommendations of the same to the Board of Governors in respect of matters relating to specialization in dentistry for programs leading to specialist qualifications.
- (viii) to recommend to the Board of Governors methods of assisting corporate members and/or provincial licensing bodies with respect to dental education, when requested.

ETHICS

Members: Dr. G.R. Thordarson, Chairman
 Dr. W.G. Leggett, Brampton
 Dr. R.A. Hunt, Winnipeg
 Dr. R.C. McClelland, Edmonton
 Dr. W.I. Vogan, Nova Scotia

The Council on Ethics has not formally met since the 1982 Board of Governors meeting and there is no report available at this time.

HEALTH CARE

REPORT OF THE COUNCIL ON HEALTH CARE TO THE 1983 ANNUAL BOARD OF GOVERNORS MEETING

- Members:
- Dr. H. Horsman, Riverview, N.B., Chairman
 - Dr. R. Bartalos, Ancaster, Ontario.
 - Dr. A.D. Crocker, Tignish, P.E.I.
 - Dr. E. Fukushima, Vancouver, B.C.
 - Dr. Keith Hamilton, Saskatoon, Sask.
 - Dr. R. Janes, Gander, Newfoundland
 - Dr. D. MacLeod, Kentville, N.S.
 - Dr. C.T. McNichol, Calgary, Alberta
 - Lt. Col. P.R. McQueen, CFDS, Ottawa, Ontario.
 - Dr. J.C. Rooney, Riverview, N.B.
 - Dr. K.R. Skinner, Winnipeg, Man.
 - Dr. A. Toeman, Verdun, Quebec
- Dr. W.R. Bedford, Senior Consultant, Dentistry,
Health & Welfare
- Ms. K. MacDonald, CDHA, Halifax, N.S.
- Ms. Suzanne Mader, President, CDAA, Halifax, N.S.
- Executive
Liaison: Dr. P.R. Crawford, Winnipeg, Man.

1. Council Meeting

Since the last Interim Board of Governors Meeting in March 1983, the Council on Health Care has met once on April 14-15, 1983.

Matters Requiring Board Action

2. Guidelines for the Control of Radiation in the Dental Office

These guidelines were presented to the CDA Board of Governors in September 1982 and March 1983. After discussion the Board made a Motion to Refer 82.12, "That the Guidelines on Control of Radiation in the Dental Office be referred back to the Council on Health Care for further consideration."

A step by step review of the radiation document was made by Council and revisions incorporated in accordance with amendments suggested by the Board of Governors.

APPENDIX I

2. Guidelines for the Control of Radiation in the Dental Office - (continued)

On completion of the deliberations Council on Health Care recommended, "That the revised document 'Guidelines for the Control of Radiation in the Dental Office' be forwarded to the Executive Council and the Board of Governors for their approval".

RESOLVED:

- 83.47 *THAT the Guidelines for the Control of Radiation in the Dental Office be adopted as appended, with an amendment to Conclusion, page 4 to read as per the following...*

APPENDIX II

ADOPTED

'If all the above guidelines are followed then patients can be assured that they are receiving a level of radiation exposure that is at the safest level possible.'

3. Orthodontic Insurance Form: Re: Submission CDA Board of Governors for Approval and Logo

Since this form has been accepted by the Canadian Association of Orthodontists and the Council on Health Care, as appended,

APPENDIX III

RESOLVED:

- 83.48 *THAT the Canadian Association of Orthodontists Standard Information Form be granted approval.*

ADOPTED

4. Uniform System of Codes & List of Services

At the Interim Board Meeting March 1983 Council recommended that 10 new codes be adopted, one for each major discipline, for "in-office" lab procedures. It was referred back to Council for development of a single code number to cover all these procedures. Dr. C.T. McNichol, Chairman of the Committee on Uniform Systems of Codes and List of Services, advised Council that a single number - 99350 presently exists in the present Uniform System of Codes and recommended

4. Uniform System of Codes & List of Services - continued

postponement of any further actions until negotiations with third party carriers can be completed.

After consideration, a recommendation was made for the introduction of procedure numbers in compliance with a request received.

RESOLVED:

83.49

THAT the following procedure numbers be added to the Uniform System of Codes & List of Services:

27711 - Cast metal post and core, concurrent with impressions (where possible) 2 sections.

27712 - Cast metal post and core, concurrent with impressions (where possible) 3 sections.

43601 - Maintenance of periodontal appliances

ADOPTED

Matters for Information Not Requiring Board Action

5. Subcommittee for the Study of Fee for Service Practice

It was reported that the search for information was now complete but the need for an analysis of the task was very evident. It was felt the terms of reference present too wide a base and the possibility of a separation into two stages, survey and methodology, was suggested. Because of the difficulties and complexities of this the Committee will be developing another proposal for presentation at a later date.

6. Committee on Fluoridation

A Schedule for Fluoride Supplement was presented and accepted by the Council on Health Care. It has now been sent to Product Acceptance Committee for input and also the provincial associations have been requested to submit any additional information prior to finalization.

7. Nutrition Labelling

The Health Protection Branch Information Letter No. 641 on Nutrition Labelling was considered and the absence of any mention of fluoride was noted. Since most foods contain fluoride in some degree and fluoride has been accepted as an essential nutrient according to the Canadian Dietary Standard it was recommended that a letter be written to the Health Protection Branch, Bureau of Consumer Affairs, National Health and Welfare requesting the addition of fluoride to their list of recommended nutrients in dealing with prepackaged labelling.

8. Occupational Health Hazards

The possibility of a workshop, in 1984 or 1985, to discuss occupational health hazards was suggested. It was decided that exploration of any other similar activities and possible funding should be made prior to any definite action.

9. Subcommittee on Dental Treatment for Indian and Inuit People in Canada

In response to a request from Health & Welfare Canada to the CDA for assistance a subcommittee was assembled from members of Council on Health Care. The Committee met with Dr. Bedford of Health & Welfare on April 13, 1983 to study the question of dental treatment for Native and Inuit people in Canada and recommend possible action.

A general discussion of the overall needs, problems, general co-ordination of efforts and the importance of setting up the guidelines ensued. The report of the Committee was adopted by Council on Health Care and forwarded to Executive Council for further development.

Respectfully submitted,

H.W. Horsman,
Chairman,
Council on Health Care.

ADOPTION OF REPORT:

The Board accepts the Report of the Council on Health Care with thanks.

COUNCIL ON HEALTH CARE - REVISIONS

GUIDELINES FOR THE PROTECTION OF RADIATION
IN THE DENTAL OFFICE

General Guidelines - Page 1

"It is highly desirable that a regular inspection program of x-ray equipment (usually 3 years) be carried out on a constant basis. It is recommended that a program to ensure consistently high quality of radiograph films by monitoring processing conditions be established."

Paragraph 5,

Insert operator/"owner"

Change qualified physicist to read qualified "technician"

Protection to Operators - Page 2

Delete paragraph 1, renumber 2 and 3 to read 1 and 2

MOTION: McQueen/Fukushima

THAT under Protection to Operators, delete paragraph 1 and renumber 2 and 3 to read 1 and 2.

Carried

Paragraph 2 reworded as follows:

"Any female operator who suspects or knows she is pregnant she will be assured that for the duration of her pregnancy she will experience minimum radiation exposure. It should be noted here that the developing foetus is particularly sensitive to x-ray damage."

Paragraph 3,

The Council feel strongly that this paragraph should remain as written.

MOTION: Skinner/McQueen

THAT under sub-heading Operators in Training, paragraph 3, remain as written.

Carried

Guidelines for the Protection of Radiation
In The Dental Office -- 2 --

Guidelines to Protect the Patient - Pages 3 and 4

First paragraph last sentence revised as follows:

"Every effort should be made to minimize the amount of radiation required necessary to diagnose the situation."

Paragraph 6 revised as follows:

"Operators should select films of a speed and quality that will permit the production of roentgenograms of an acceptable diagnostic quality with minimum exposure of the patient to radiation."

X-Rays and the Pregnant Patient - Page 4

Paragraph 2, revised as follows:

"Where radiographs are necessary, maximum safeguards should be taken, consistent with current accepted techniques."

GUIDELINES FOR THE CONTROL OF RADIATION
IN THE DENTAL OFFICE

INTRODUCTION:

Since the Federal Government maintains jurisdiction over the standards of construction and functioning of x-ray equipment, while its installation, registration and office design criteria for its use are promulgated by provincial legislatures, any guidelines developed by C.D.A. for the use of x-radiation in the dental office should not deal specifically with legislative areas but rather set forth standards of practice for dentists which reflect and demand professional competence and judgement.

General Guidelines

1. All x-ray equipment should conform to the Federal requirements of the Radiation Emitting Devices Act.
2. All equipment installation and room design criteria, e.g. with respect to wall insulation, (lead lining or equivalent) should be in conformance with Provincial regulations. In the absence of existing Provincial regulations in any particular jurisdiction, the dentist should refer to Health & Welfare Canada Safety Code 22, National Council on Radiation Protection & Measurements, Report 35, or the ADA Recommendations on Radiographic Practices, 1981.
3. All operators should possess an adequate knowledge of radiation physics, radiation hazards and be able to produce consistent radiographs of diagnostic quality with a minimum of overall radiation exposure.
4. It is highly desirable that a regular inspection programme of x-ray equipment (usually 3 years) be carried out on a constant basis. It is recommended that a programme to ensure consistently high quality of radiographic films by monitoring processing conditions be established.
5. It is highly desirable that the operator/owner request a qualified technician to perform a regular inspection of the x-ray equipment to assess radiation output and "normalize" the x-ray taking system; that is, ensure that existing exposure and processing conditions are producing radiographs within an acceptable exposure range.
6. An exposure guideline chart should be fixed near the x-ray timer indicating kV, mA and the exposure time to be used for children, adults and edentulous patients.

7. View exposed radiographic film under optimal conditions. A variable intensity viewer is desirable. Extraneous light should be minimized.
8. It is highly desirable that dentists enroll in continuing education in the many aspects of diagnostic radiology, diagnostic technology and radioprotection.

PROTECTION TO OPERATORS:

1. All operators should be licensed or certified according to a standard recognized by the provincial dental licensing body.
2. Any female operator who suspects or knows she is pregnant must be assured that for the duration of her pregnancy she will experience minimum radiation exposure. It should be noted here that the developing foetus is particularly sensitive to x-ray damage.

Operators in Training

1. Personnel here must work under the supervision of a licensed dentist.
2. The minimum age of operators in training should be ideally 16 years of age but notwithstanding the guideline, any student under the age of 16 years shall not receive a dose to the gonads and/or bone marrow in excess of 500 millirems in any one year.
3. Personnel must not be exposed to the primary beam. Deliberate exposure of an individual for training purposes must not be carried out.

GENERAL GUIDELINES FOR OFFICE PERSONNEL:

1. A room must not be used for more than one x-ray procedure simultaneously.
2. No person, whose presence is not essential must be in the room during an exposure.
3. If the operator must be in the room with the patient during exposure, then protective clothing must be worn.
4. The dental film should be fixed in position using holding device where necessary.

5. If parents or escorts are called to assist, then protective clothing should be worn.
6. The x-ray housing must not be held by the hand during operation.
7. All office personnel working with x-ray equipment should wear personnel dosimeters.
8. Dosimeters should be worn under the protective lead apron if the operator is in the room with the patient during exposure.
9. In situations where excessive radiation doses (greater than 25% of maximum permissible) are received by any one person, then remedial steps must be taken to improve techniques and protective measures.

GUIDELINES TO PROTECT THE PATIENT:

The risk to the individual patient from a single dental x-ray is very low. However, the risk to a population is increased by increasing the frequency of x-ray examinations and by increasing the number of persons x-rayed. Every effort should be made to minimize the amount of radiation required necessary to diagnose the situation.

1. The prescription of an x-ray examination by a licensed dentist should only be based on a clinical evaluation and be for the purpose of obtaining information not readily available from other sources.
2. The justification for taking dental radiographs should be determined by a perceived need to obtain specific information which could contribute to a correct diagnosis or prevention rather than utilizing the concept of the routine periodic examination with or without having seen the patient beforehand.
3. One should determine if any recent x-ray films are available and see if those are adequate.
4. When a patient is transferred from one dentist to another and diagnostic information is sought which might have been available on previous radiographs, then the referred dentist should attempt to obtain such radiographs rather than routinely order a new prescription of radiographs.
5. The number of radiographs required should be kept to a minimum, consistent with obtaining the required information.

6. Operators should select films of a speed and quality that will permit the production of roentgenograms of an acceptable diagnostic quality with minimum exposure of the patient to radiation.
7. The quality of radiographs should be monitored routinely to ensure that they satisfy diagnostic requirements.
8. Repeat films should not be taken if the radiograph is not of the "best" quality but sufficient diagnostic information is contained within.
9. A lead apron and thyroid collar should be used for the taking of intra-oral films.
10. The x-ray beam should be well-collimated so that it irradiates only the minimum area necessary for the examination. Under no circumstances should it be in excess of 7 cm. (2-3/4") at the level of the skin.

X-Rays and the Pregnant Patient

1. Elective procedures should be deferred until after pregnancy.
2. Where radiographs are necessary, maximum safeguards should be taken, consistent with current accepted techniques.

CONCLUSION:

There is really no "safe" level of radiation exposure. The frequency of the making of x-ray films is a matter of clinical judgement. The selection of equipment and techniques used is the decision of the dentist. However, the ultimate aim is to reduce the level of x-radiation emanating from the dental office and to this end there has evolved and been accepted a principle stating that an x-ray dose that can be reduced without loss of critical diagnostic information and without too much expense or inconvenience, should be reduced no matter how low it is and that a dose that can be avoided altogether without grave consequences, should be avoided. That is the ALARA Principle. (As Low As Reasonably Achievable).



STANDARD INFORMATION FORM

Approved by

The Canadian Association of Orthodontists

(A)

NAME

ADDRESS

CITY, PROV.

POSTAL CODE

TELEPHONE

(B)

NAME OF PATIENT

(C)

☐ FULL TREATMENT CASE

☐ LIMITED TREATMENT CASE

(D)

BRIEF DESCRIPTION OF CONDITION

(E)

Starting date of active treatment

(F)

FINANCIAL ARRANGEMENTS:

Preparatory Procedures

Initial Examination ☐ Date: \$

Diagnostic Phase ☐ Dates: \$

Treatment Procedures

Initial Payment \$

Monthly Fee ☐ or Quarterly Fee ☐ \$

Other Payment Plan \$

Retention/Observation Fee \$

Estimated Total Fee (if applicable) \$

This is a fee estimate for recommended orthodontic services.

These services and fees may vary during treatment.

(G)

ADDITIONAL EXPLANATORY COMMENTS:

(H)

Date 19

(I)

The information on this form is valid
for months from above date.

(J)

SIGNATURE OF CERTIFIED ORTHODONTIST

This section to be completed by Patient/Parent/Guardian		
APPENDIX III		
Insurance Carrier		
SUBSCRIBER	Name	
	Address	
	Employer	
	Address	
GROUP POLICY	CERTIFICATE NO.	SOC. INS. NO.
PATIENT'S DATE OF BIRTH		RELATIONSHIP TO SUBSCRIBER
		DEPENDANT NO.
FOR PATIENTS USE ONLY		

COUNCIL ON HOSPITAL SERVICES

REPORT OF THE CDA COUNCIL ON HOSPITAL SERVICES TO THE 1983 BOARD OF GOVERNORS

Council Members	Dr. M. Gornitsky, Chairman, Montreal
	Dr. E. Cree, Montreal
	Dr. K. Gordon, Edmonton
	Dr. J.H. Gryfe, Toronto
	Dr. W.H. Susse1, Chilliwack
	Dr. G.L. Terriss, Halifax
Exec. Liaison:	Dr. D.L. Thompson, Calgary

1. COUNCIL MEETINGS

One meeting of the Council on Hospital Services has been held since the 1983 Interim Meeting of the Board of Governors, on June 17th and 18th, 1983. All members of Council were present, with the exception of Dr. E. Cree who was attending a conference in Berlin. The Executive Liaison Representative and the Executive Director were also present.

2. ITEMS OF BUSINESS FOR BOARD ACTION

(1) Proposed Workshop

The problem of the lack of qualified surveyors for hospital programs still exists and Council would like to re-introduce the recommendation put forward at the Interim Board meeting that a one day workshop be held in the near future. This item has been included in the proposed budget for 1984

RESOLVED:

83.50

Whereas the sophisticated approach to dentistry today, along with the necessity to monitor and attend to the needs of patients within the hospital delivery system, has established an increased awareness of hospital dental services, the Council on Hospital Services proposes that a one day Workshop be held and

that this Workshop be chaired by the Chairman of the Council on Hospital Services and the following be invited to participate:

COUNCIL ON HOSPITAL SERVICES

2.

1. *Council members and Executive Liaison member*
2. *Chairman of the Council on Education*
3. *Members from each of the licensing bodies in which hospital dental services are represented, at their own expense*
4. *Other interested dentists, at their own expense, to a maximum of 40.*

The stated objective is to enlarge the pool, train and standardize hospital surveyors.

A sum of \$4,000 will be required for the Workshop.

Executive Council suggests that the proposal for a one-day workshop recommended by Council on Hospital Services be approved in principle, subject to Management Committee ensuring that significant participation (i.e. approximately twenty interested dentists or more) is evident six weeks prior to the workshop date.

ADOPTED

(2) Long Term Care Institutions

APPENDIX I

Attached as Appendix I are guidelines pertaining to the dental care for chronic care patients approved by Council. It is suggested that a knowledgeable person could be made available to visit any corporate body, upon request, to assist them in instituting the plan, as outlined in Appendix I. Council recommends for Board approval:

COUNCIL ON HOSPITAL SERVICES

3.

That the attached guidelines pertaining to dental care for chronic care patients be adopted by the Canadian Dental Association.

83.51

DEFEATED

Executive Council disagrees with many portions of the Guidelines. Corporate members cannot be forced to implement an oral care program for chronic care patients within their provinces. In addition, the Guidelines should be broader in nature and helpful to any province in efforts to implement such programs.

ADOPTED

Note: The Board adopted the Executive Council comments above.

(3) Guidelines for Sterilization Procedures in Hospitals

APPENDIX II

Council has approved the guidelines shown in Appendix II. Copies of these Guidelines have been forwarded to all Corporate Members and they are being published in the August issue of the Journal.

RESOLVED:

83.52

That the Canadian Dental Association approve the guidelines for sterilization Procedures in Hospitals, as presented by Council.

DEFEATED

Executive Council disagrees with certain portions of Guidelines for Sterilization Procedures in Hospital Dental Departments and therefore recommends:

- a) that all "must" phrases, and other restrictive phrases be changed in order to make available alternate procedures of equal value;*
- b) that the document be reviewed periodically to ensure items 12 & 13 are current information.*

MOTION (from the floor)

83.53

THAT the Guidelines for Sterilization Procedures in Hospitals, as presented by Council on Hospital Services be returned to Council for reconsideration and to reflect the remarks of the Board of Governors and to be represented to the Board in April, 1984.

ADOPTED

COUNCIL ON HOSPITAL SERVICES

4.

3. ITEMS FOR INFORMATION

(1) Surveys

Council approved the following Dental Service and/or Internship/Residency Programs:

St. Joseph's Hospital London	Dental Service and Internship
University Hospital, London	Dental Service and Internship
Victoria Hospital, London	Dental Service and Internship
Deer Lodge Hospital, Winnipeg	Dental Service
Montreal General Hospital, Montreal	Dental Service and Residency
St. Mary's Hospital Montreal	Dental Service and Residency
St. Vincent de Paul, Sherbrooke	Dental Service and Residency
Jewish General Hospital, Montreal	Dental Service and Residency

Respectfully submitted,

M. Gornitsky,
Chairman,
Council on Hospital Services

ADOPTION OF REPORT

The Board adopted the Report of Council on Hospital Services with appreciation and with special thanks to Dr. Gornitsky who is retiring from Council.

ORAL CARE OF CHRONIC CARE PATIENTS
PROPOSED GUIDELINES

PREAMBLE

It is acknowledged that a serious lack of oral care exists in various levels of long term care institutions across Canada.

The Canadian Dental Association wishes to go on record that the profession must address this problem forthwith. Provincial dental organizations must ensure that respective ministries of health be approached to implement a care program administratively. Provincial organizations must also ensure that the profession be available to provide this care in a co-ordinated and ongoing manner.

1. A broad philosophy of care and parameters of service must be developed by the profession to serve as guidelines for practitioners.
2. A vigorous program by the corporate members of the Canadian Dental Association must be launched to ensure participation of the entire profession in supporting the provision of dental care to chronic care patients.
3. The program must embrace institutionalized patients and patients supported by long term care outside the institutions. Care will be delivered within institutions or in the private practice office or, if either of these resources is not available, the mobile dental facility may have to fill the void.
4. An orientation program must be evolved to acquaint key members of the profession with the basis of knowledge in the chronic care field so that regional dental staffs can receive direction.
5. Oral care must be integrated with general care for the patient.
6. The utilization of the CDA "Oral Care Manual" would be helpful in directing day to day care especially by regular institutional nursing staff.
7. Existing nursing staffs should be trained to provide "daily minimal oral care" as part of the overall hygiene program for the patient.
8. Private practice practitioners and staff from the geographic area of the institution should be the primary source of manpower to deliver dental services.
9. Augmentation of private practitioners may be required through community public health resource staffs, especially in areas short of dental manpower.
10. A dentist shall direct the oral care program plus required auxiliaries on a continuing basis for each institution.

Oral Care of Chronic Care Patients,
Proposed Guidelines
Continued -

-2-

11. In-service education programs must be initiated by dental staffs within the institutions that they serve.
12. Early assessment of the dental needs of the patient is essential for a well run program.
13. Inter-professional consultations prior to and during dental treatment are essential.
14. Adequate equipment and supplies must be made available in institutions for the profession to render services.
15. Standardized administrative procedures are important for good auditing of the program and an administrative protocol must be developed.
16. A combination of sessional remuneration and fee-for-service must be evolved so that participating dentists and auxiliaries receive adequate and fair remuneration for their time. Administrative as well as treatment time must be recognized. A simple, standardized billing system must be initiated.
17. All dentists rendering care shall be members of the medical dental staff of the institution.
18. The Consulting Dentist shall be responsible for:
 Program Administration,
 Co-ordination of treatment and/or
 Rendering treatment.

Oral Care of Chronic Care Patients,
Proposed Guidelines
Continued -

-3-

MODEL FOR DELIVERY OF CARE

Part I - Provision of Oral Care in Extended Care Units

1. A "consulting dentist" should be appointed in each ECU to oversee and administer the program.
2. Remuneration for this practitioner to be on a sessional basis as administration will be an important part of his responsibility.

Provision of Oral Care for Long Term Care Patients

3. The consulting dentist will marshall the dental resources of the community to provide care to patients on a fee for service basis and possible augmentation on a sessional basis depending on the services involved.
4. It will be the consulting dentist's responsibility to see that the basic tenets of the oral care program are instituted.
5. To help the consulting dentist get the program underway, attendance at a one day orientation session may be desirable.

Part II - Provision of Oral Care in Intermediate Care Units

Similar to Part I above. In areas involving small numbers of patients the ECU consulting dentist may be able to handle both.

Part III - Patients Receiving Home Care Support

1. Monitoring of dental needs by Health Unit personnel may be possible. Access to consulting dentist is essential
2. Consulting dentist directs patients to offices or hospital dental services as required.
3. Provision of transportation may be an essential component of this service.

SPECIAL CONSIDERATIONS FOR DENTAL CARE
OF EXTENDED CARE UNIT PATIENTS
(A basic guide for dentists)

Initial Concepts

1. It is important to maintain the dignity of the individual patient.
2. It is important to involve the patient in the decision making process with respect to his treatment as much as possible.
3. Psychological considerations must be recognized in planning and rendering treatment.
4. The object of treatment may not always be to cure but to optimize the quality of life for the patient regardless of how long or short that time may be.

Common Problems Encountered in the ECU Patient

1. Oral Hygiene
2. Oral lesions a) pathologic
 b) dystrophic
3. Lack of masticatory ability
4. Nutritional inadequacy
5. Lack of comfort; pain.
6. Lack of esthetics - (often not verbalized)

Oral Spectrum of the ECU Patient

A. Geriatric

1. Soft Tissues

1. decreased secretion
2. decreased mucosal thickness
3. decreased papillation of tongue
4. decreased muscular function

II. Bone

1. loss of alveolar bone
2. changes of trabecular pattern

III. Periodontal

1. decreased thickness of periodontal ligament
2. mobility and drifting of teeth

IV. Temporomandibular Joint

1. degenerative joint changes

V. Teeth

1. root caries
2. increased attrition
3. increased enamel crazing
4. decreased pupal mass
5. increased brittleness

B. Pediatric or adolescent (severely retarded or brain-damaged).

1. Spectrum of tissues generally "normal" as related to age.

Communication with the ECU Patient

1. often difficult with the patient
2. should include family
3. important to keep questions simple
4. important to be a good listener
5. information not available from the patient is often obtainable from ECU staff who are in day-to-day contact. Make them part of your "team".

Philosophy of Care for the ECU Patient

a) Key Factors to Consider

1. physical/mental condition of the patient
2. stamina
3. desire for care
4. need for care
5. family group
6. general program, e.g. physical needs, physiotherapy, braces, etc.

b) Objectives

1. eliminate pain
2. eliminate infection and/or pathology
3. optimize tissue health
4. optimize function
5. promote comfort

c) Physiology

Understand effects of aging on:

1. muscles
2. tongue
3. mucosa
4. bone
5. periodontium
6. teeth
7. T.M.J.
8. Occlusion

How to Initiate Treatment for ECU Patient

1. Arrange time of visit to facility with the nursing manager in charge of the ward or floor by phone prior to visit. Time of examination must fit into the facility schedule as well as being convenient to you. This will assist you to get the procedure done with a minimum of wasted time as everything will be ready by pre-arrangement.

2. At time of visit get a brief report from head nurse on the general condition of the patient. Examine chart and note any conditions and/or medications that would influence oral care.

3. Examination

- a) have nurse accompany you to room
- b) utilize flashlight and tongue depressors
- c) introduce yourself to the patient and explain who you are and what you are going to do. Get as much information as possible from the patient.
- d) conduct brief examination of patient.
- e) write up chart and request x-rays, lab tests, etc., as required.

4. Consultation

- a) For overall health concerns consult with patient's physician.
- b) utilize expertise of other team members, e.g. nurse, dietician, physiotherapist, pharmacist, etc.

5. Treatment

1. Initiate treatment as indicated on the basis of examination results and consultative information.
2. Remember to ensure that some form of informed consent is obtained before treatment is initiated.

Resource person shall discuss periodontics, endodontics, surgery, restorative dentistry, prosthodontics, etc.

PRIMARY COMMUNICATION LINES

Community
Dental Manpower
Pool
Dentists
Auxiliaries
Laboratory

CHRONIC CARE DENTAL
PROGRAM

CONSULTANT DENTIST

Health Unit Staff
M.O.H.

Public
Health
Prev.
Care

Home
Care

Long
Term
Care

Dental
Staff

Patient Pool
Institutionalized
Extended Care
Intermediate
Personal Care Homes
Non-Institutionalize
Home Care
Long Term Care

GUIDELINES FOR STERILIZATION PROCEDURES IN HOSPITAL DENTAL DEPARTMENTS

The object of these guidelines is to provide a practical method for use in hospital dental departments to control infections. The emphasis is on the word "control" rather than "eliminate" as measures ensuring complete elimination are theoretically possible but not practically applicable in routine day-to-day practice.

To direct the philosophy of infection control we must determine whom we are protecting and what we are protecting them against. In our situation we must protect (a) the patient and (b) members of the dental treatment team.

The diseases and/or organisms involved are relatively few in spite of long lists of potentials one often sees. Patient to patient (fomites) transfer includes:

- (a) Hepatitis B
- (b) Herpes simplex I and II
- (c) Mycobacterium tuberculosis
- (d) Slow virus disease (speculative), e.g., Kreutzfeld-Jakob disease

Patient-operator transfer (direct) includes all of the above plus *Treponema pallidum* (syphilis).

Other pathogenic or potentially pathogenic micro-organisms may exist in our patients, however, it should be borne in mind that the majority of oral infections are endogenous and respiratory (droplet) infections are more a factor of our waiting rooms than of our operatories. It should also be remembered that if we control the infections listed above, other pathogenic potentials will also be controlled as they are lower on the scale of transmissibility and resistance to biocidal agents.

METHOD:

1. All patients should have a thorough medical history taken prior to treatment and be examined for signs of potential infectivity.
2. All members of the dental team should utilize protective gear for all procedures to include:
 - a) rubber gloves
 - b) eye protection
 - c) masks
 - d) rubber dam for patient wherever possible

3. Biocidal/antiseptic soap should be used frequently on gloved and ungloved hands - and between all patients prior to commencement and on completion of treatment.
4. All instruments must be pre-cleaned in disinfecting solutions prior to sterilization or cleaned in ultra-sonic cleaning units. Personnel should have protective gloves, etc.
5. Effective control requires heat sterilization for all instruments used on patients.
6. Work surfaces, lights, etc., that cannot be heat sterilized must be effectively decontaminated with "high level" chemicals. Hand-pieces may as secondary choice be treated similarly.
7. All waste materials must be disposed in sealable plastic bags for effective avoidance of cross contamination. Air-liquid wastes should be evacuated during patient procedures via closed system, high-volume suction in the case of operative procedures or, in surgical procedures only, standard closed system suction.
8. Air-water syringes, handpieces and suction lines should be periodically flushed with viricidal or bleach solution.
9. Contamination of work surfaces, charts, drawer handles, lights should be avoided by using techniques of non-handling with contaminated hands or by use of protective shields.
10. Sterilization containers and/or packages must be compatible with the modality used and should have a marker strip to signal adequate exposure to heat. As well as chemical markers, biological testing of equipment should be carried out periodically.
11. Suggested methods of sterilization are, in order of desirability in terms of effectiveness and ease of application to dental instruments:
 - (a) unsaturated chemical vapour (chemiclave)
 - (b) steam autoclave
 - (c) dry heat
12. The only currently effective cold chemical agents recommended are:
 - (a) 2% alkaline glutaraldehyde
 - (b) 1:5 dilution of household bleach
13. Antimicrobial preparations for handwashing currently recommended are products containing 4% chlorhexidine, e.g. Hibitane skin cleanser - Ayerst

SUMMARY

It is presumed that the above guidelines are applied by personnel trained in basic sterilization knowledge and technics hence detailed application and usage have not been elaborated. Although directed at the hospital dental clinic, the same standards are applicable in routine private practice as well. We must always remember that the known infectivity risk patient is not the potential for danger in terms of disease transmission as much as the unknown risk patient. It is towards both groups that our efforts for infection control must be directed at all times.

Defeated
September 1983

COUNCIL ON INFORMATION SERVICES

REPORT OF THE CDA COUNCIL ON INFORMATION SERVICES TO THE 1983 ANNUAL BOARD OF GOVERNORS

Members: Dr. Y. Kamachi, Ontario - Chairman
Dr. W.T. Koltek, Manitoba
Dr. C.S. LeBlanc, New Brunswick
Dr. D. Scramstad, British Columbia

Dr. J. Laporte, Executive Liaison

Council Meetings

1. Since the March 1983 Board of Governors meeting, the Council has met once, that being June 10, 1983.
2. Mr. Jacques Richer of the O.D.Q. attended the June 10th meeting as an observer since a Québec representative had not been appointed to the Council to replace Dr. Michel Carvonis.

Matters Requiring Board Action

3. As a result of the motion accepted by the Board of Governors (that CDA develop a national campaign to create greater dental awareness) a three-year public education program was discussed by Council members. A copy of that program along with the estimated budget for Year 1 is attached.

ATT. 1

RESOLVED:

- 83.54 "THAT the proposed three-year Public Education Program be approved and that \$80,000 be included in the 1984 Budget Projection under special projects - Dental Awareness."

DEFEATED

Direction: That the Council on Information Services review the report including an update of recent experiences such as the American Dental Association and return this information to the next Board of Governors meeting in April, 1984.

For continuity purposes the Council agreed that each provincial Executive Director be requested to name a representative for a three-year term in their respective province to coordinate and participate in the public education program.

COUNCIL ON INFORMATION SERVICES

2.

Matters of Information not Requiring Board Action

National Dental Health Month

4. In total, the amount of promotional materials distributed by both corporate and national bodies surpassed the number distributed last year.

CDA developed newspaper advertisements to complement existing promotional materials (samples attached). These advertisements were distributed to provincial Dental Health Chairmen with the addresses of their provincial daily and community newspapers. The Chairmen were requested to distribute these advertisements as public service announcements to the newspapers in their own province.

ATT. 2

The editorial coverage for NDHM in newspapers was very successful. There was a total of 64 English and 23 French language press clippings received from Bowden's Clipping Service.

The national poster contest this year attracted 36 entrants from six provinces. There were two national winners from Manitoba and one from Alberta. The winners received a cheque in the amount of \$175 to be used towards the purchase of new bicycles.

It was suggested that the 1984 NDHM be part of the public education program.

Pamphlets

5. Two new pamphlets have been produced and are available from the CDA.
- | | MEMBERS | NON-MEMBERS |
|-----------------------------------|-------------|-------------|
| 1. Do you Need Complete Dentures? | \$12.00/100 | \$18.00/100 |
| 2. Are you Missing A Few Teeth? | \$ 8.00/100 | \$12.00/100 |

Last February, due to a change in personnel and of priorities a follow-up on the TMJ, Paedodontic and Restorative pamphlets was postponed. CDA staff will now proceed to contact the individuals assisting in the preparation of these pamphlets.

Presently it is taking up to 18 months to prepare pamphlets for printing. The Council agreed this was too long and therefore a new procedure will be followed. That is, several specialists in a given subject will be contacted by the CDA staff to provide information. From this information, a draft will be prepared by the CDA and circulated to Council members for comment. If necessary amendments will be made and a final draft prepared for the perusal of Council members.

Media Workshop

6. Council members felt that the media workshop held in Moncton was very successful and that CDA members should be made aware of its availability. In this regard, an article will be contained in the next Communiqué. There is a possibility that this workshop will be available in French. The CDA staff is exploring this possibility. A report on the workshop in New Brunswick is attached for information. ATT. 3
7. Due to illness Dr. Laporte was unable to attend the last meeting of this Council. Council members extend wishes for a speedy recovery to Dr. Jean Laporte, Executive Liaison.
8. Council members extended their appreciation to Dr. Scramstad for his hard work and devotion during his six year tenure on the Council on Information Services. During that time, Dr. Scramstad served as National Dental Health Month Chairman for a three-year period.

Respectfully submitted,

Dr. Y. Kamachi
Chairman
Council on Information Services

ADOPTION OF REPORT:

The Board accepts the Report of the Council on Information Services with thanks.

A
THREE - YEAR
PUBLIC EDUCATION PROGRAM
TO
INCREASE DENTAL AWARENESS

Council on Information Services
June 1983

During its last meeting, March 4-5, 1983, the CDA Board of Governors approved the following motion presented by this Council:

"That CDA play a strong leadership role to inform and educate the public regarding dental disease, prevention and treatment through the development of a national campaign to create dental awareness"

and

"That National Dental Health Month activities be reviewed and oriented in taking a leadership role in informing and in launching a communications program."

A review of provincial activities reveals a strikingly high level of activity during National Dental Health Month. Individuals involved in organizing National Dental Health Month provincially should be commended on a job well done. One can see by the number of press clippings received at the CDA that an enormous amount of time and effort is expended on educating the public on the importance of dental health.

Unfortunately, some alarming facts exist today even after all the work of both national and provincial bodies to change public attitudes:

1. The public does not equate dental services with total health care
2. 40% of the Canadian population do not visit dentist on a regular basis
3. there is an oversupply of dentists today

.../2

How do we change these facts? Both the CDA and corporate members must educate the public year-round - not about the profession but rather about the importance of dental care as it relates to total body health.

It will take several years of concentrated effort to educate the public and to permanently change attitudes. This is why the CDA, with the assistance of corporate members, is developing a plan of action regarding dental awareness. The Council on Information Services believes that there is strength in numbers and that if both CDA and corporate members work together on a public education program for a minimum three-year period, a positive change in public attitude will be witnessed, which will result in a greater demand for dental services. The following three-year program has been approved by Council and has been presented to corporate members for review and comment. Program activities contained therein are not necessarily steadfast and priorities could possibly change as the overall program progresses.

YEAR ONE

Purpose

- to inform the provincial organizations of the CDA public education program and request their input, support and cooperation
- to develop mechanisms for exchange of information between provincial and national dental bodies
- to start educating the public by means of both print and electronic media in order that they will have the opportunity to realize that dental care should be given a high priority in total health

.../3

Activities

Nationally

1. The CDA cannot educate the entire Canadian population alone. During this first year, CDA in addition to public education, must prove to the provinces that we can provide a strong leadership role. Unless support is earned there will be conflict, not coordination and cooperation which is essential to the success of our efforts.
2. The CDA will establish contact with organizations now involved in dental health promotion:
 - a) Health and Welfare Canada
 - b) holders of the CDA Seal of Recognition
 - i) Beecham Canada Inc.
 - ii) Certalab Inc.
 - iii) Colgate-Palmolive
 - iv) Lever Detergents Ltd.
 - v) Procter & Gamble
 - vi) Warner Lambert
 - c) dental auxiliaries
 - d) specialty sections
 - e) other outside organizations such as the Milk Marketing Board

CDA will discuss the public education programs developed by these organizations and the possibility of working together.

.../4

3. CDA will contract an advertising agency to develop promotional materials to meet our objectives. Publicity is an important part of public relations. The most effective method of contacting the general public is through the mass media: newspapers, magazines, trade journals, radio and television. A number of advertisements will be produced for use at various times throughout the year and will be distributed to both print and electronic media.

PRINT MEDIA

1. Newspapers

Newspapers reach more people more often than any other medium. They are read at the reader's leisure and convenience which is in sharp contrast with the broadcast media where a program missed is gone forever. One important limitation of the newspaper is that the average reader spends 30 minutes reading only 1/5 to 1/4 of the editorial content. Providing newspapers with news, pictures and features of value and of timely interest to readers not only brings publicity but builds good press relations.

2. Magazines

The number, variety and circulation of magazines are almost limitless. There are more than 420 general consumer magazines in Canada. In addition to these magazines there are hundreds of trade and specialized publications. Opinion leaders read many magazines.

The U.S. survey, Public Use of the Library and Other Sources of Information, records that "seven out of ten adults report reading at least one magazine regularly." Magazines provide more durable information than newspapers. The magazine reader has the opportunity to read, reread, discuss and debate the information gleaned from this source.

ELECTRONIC MEDIA

1. Radio

This is the only medium that "reaches the breakfast table and living-room, rides to and from work in the car, invades the bedroom and goes along to the beach, to the woods and even on fishing trips". Radio stations blanket the country, and today are almost as common in small towns as in large cities. There are 380 radio stations in Canada. More than 98.7% of Canadian homes, 8,152,000 in number, have radios.

2. Television

Television grew to full size in one decade - the 1950's. It is the communication phenomenon of the century. In 1982, 98.2% of Canadian households had television sets receiving broadcast from 255 television stations. The key to unlock the electronic media is knowledge of their values, program needs and changing technical requirements.

.../6

All advertisements produced by an advertising agency will be distributed as public service announcements. This method of advertising is successful only if:

- a) top quality materials are produced in the format desired by the media
- b) materials are distributed properly
- c) all materials are placed as public service announcements
- d) a follow-up is conducted

Distribution of promotional materials produced by an advertising agency should be conducted as follows:

MEDIUM	CDA	PROVINCES
Television	To distribute material to television networks (e.g. CBC, CTV, Global, English and French) with a covering letter	To distribute announcements locally, in person if at all possible, if not then with a personalized letter. (CDA to provide list of all television stations)
Radio	To distribute taped announcements to all 380 Canadian radio stations with a covering letter Prepare live radio copy (to be read by individual announcers) for distribution to the provinces	Localize live radio copy prepared by CDA and distribute to radio stations within the province with a covering letter
Print (Newspaper/ Magazine)	Magazine advertisements will be distributed to approximately 400 (English and French) national consumer business, religious, farm, scholarly, university, and school magazines. CDA to provide provinces with a list of these publications	Both magazine and newspaper advertisements will be distributed provincially as seen fit by the provincial body. Ads must not be distributed, however, to magazines in CDA distribution

4. In addition to the distribution of promotional materials produced by an advertising agency, CDA will be educating the public by other means.
 - a) Expansion of the pamphlet/film program - presently these materials are being distributed only to the profession. The public must be made aware of the availability of these materials. CDA will approach Shoppers Drug Mart to arrange the placement of selected pamphlets in the health centers of the pharmacies.
 - b) New films - CDA is presently involved with the National Film Board in determining the feasibility of updating a 1949 animated film on dentistry. During the initial discussion a second film possibility surfaced and we are currently investigating this joint National Film Board, Canadian Dental Association and Health and Welfare Canada endeavour.
 - c) Syndicated Newspaper Column - through Power News Syndicate, CDA can distribute syndicated dental health articles to 1031 English language and 203 French language newspapers in Canada. After six months we can expect a circulation of over 8 million. CDA will approach the specialty sections to solicit their expertise in preparing the articles and for possible financial support. If CDA was to purchase the amount of space we expect to receive now as a public service, it would cost approximately \$67,000.

.../8

- d) CDA Seal of Recognition - CDA has discussed the need for dental education with the majority of companies holding the Seal of Recognition. The companies approached are most eager to assist CDA and have indicated their willingness to participate:
 - i) in advertising in a special magazine supplement to be developed by the CDA and inserted in a consumer magazine such as Canadian Living
 - ii) by allowing the CDA to insert educational messages in dentifrice boxes
- e) Children's Television Programs - CDA will approach the key personnel involved in the production of programs such as Sesame Street, Romper Room, Polka Dot Door, Mr. Dress-Up, Friendly Giant, to urge them to include information on dental care in their programs.
- f) Seminar for Council members and National Dental Health Month Chairmen. A seminar should be held to discuss how to best utilize the promotional materials

Provincially

1. Corporate members should seek out, establish contact and discuss public education programs with provincial organizations, including government departments, involved in dental health promotion. Care should be taken however not to duplicate contacts made by the CDA.

.../9

2. CDA will produce promotional material for television, radio and the print media. Corporate members can avail themselves of this service if desired.
3. CDA will be expanding the distribution of dental education pamphlets. Corporate members should explore the feasibility of stocking these pamphlets and with the cooperation of the CDA develop a plan to disseminate this information provincially.
4. Producers of provincial children's television programs should be approached and requested to write dental education information into their programs. This effort should be done with the cooperation of the CDA in order to assure a duplication of effort does not occur.

YEAR TWO

Purpose

- to reinforce the messages delivered to the public in Year 1.
- to expand the communications program
- to advise the profession on CDA endeavours

Activities

Nationally

1. Seminar for science writers - CDA has little or no control on what is being written today about dentistry. As a result, in many cases the public is being misled by incorrect or incomplete information.

.../10

The seminar would serve several purposes:

- i) establish contact with writers
 - ii) provide writers with up-to-date information on dentistry
 - iii) CDA will become known as the organization to contact whenever information is required by a writer thereby giving CDA some control over what the public will read
2. Determine the extent of dental education in the school system - if it is determined that there is a definite need for an expanded program, such will be developed by the CDA.
3. Distribution of pamphlet/films to the public through provincial dental organizations - due to the increased promotion of dental health, the public will be requesting information in the form of pamphlets. To better serve the public, requests received at the CDA would be forwarded to the appropriate province for action. In this way the provincial body can provide the information requested in addition to pertinent local information.
4. Production of additional materials - new television and radio spots and print advertisements will be produced and distributed as in Year 1. Advertisements in other forms will be produced i.e. interior transit cards, posters, new pamphlets.
5. National television program - CDA will investigate the possibility of producing, in cooperation with CTV, a 60-minute special similar to the National Fire Drill.

.../11

6. Seminar at National Convention - the dental profession must be made aware of the CDA public education program and what the anticipated consequences will mean to them. A half-day presentation would be conducted during the convention in Ottawa.
7. Evaluation of penetration of children's television program - CDA will determine the level of success attained in this endeavour and whether there would be room for expansion of the education campaign through this medium.
8. Investigate other methods of reaching the public - i.e. National Speakers' Bureau, mobile education vans.

Provincially

1. Corporate bodies will be requested to assist in the development and promotion of the seminar for science writers.
2. CDA will require the assistance of all corporate bodies to determine the extent of dental education being conducted in the schools.
3. The plan to disseminate dental education pamphlets developed in Year 1 should be implemented this year.
4. As in Year 1, corporate members can purchase CDA-produced promotional materials for distribution within their own provinces.

.../12

YEAR THREE

Purpose

- to continue educating the public in the most effective way
- to evaluate the change in public attitude as a result of the three-year communications plan

Activities

Nationally

1. Inclusion of dental health program in school curriculum
2. Production of additional promotional items to reinforce our dental health messages
3. Evaluation of Program - CDA will contact with a professional research firm such as Gallup, to determine the increase in the public's dental health awareness

Provincially

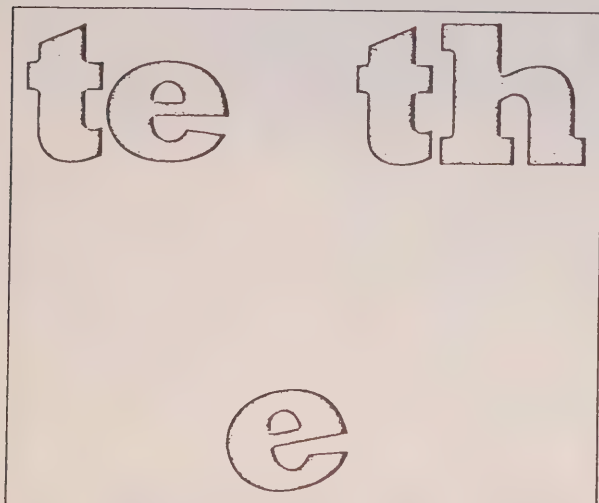
1. Assistance will be requested by CDA in the preparation of a dental education module for distribution at the provincial level
2. Distribution of CDA-produced promotional materials
3. Evaluation of the public education program

ESTIMATED BUDGET

	<u>PRODUCTION</u>	<u>CDA DISTRIBUTION</u>	<u>PROVINCIAL DISTRIBUTION</u>	<u>TOTAL</u>
<u>Television</u>				
2 sets - 10-,30-second,	30,000	1,500	3,000	34,500
 <u>Radio</u>				
2 sets - 30-second,	5,000	300	3,300	8,600
 <u>Print</u>				
1. Power News Syndicate	17,000			17,000
2. Newspaper/Magazine Advertisements	5,200	1,000	700	<u>6,900</u>
 ADVERTISING AGENCY FEE				
	<u>20,000</u>	<u> </u>	<u> </u>	<u>20,000</u>
	77,200	2,800	7,000	87,000
	<u><u>\$80,000</u></u>			

N.B.

All advertisements will be produced in both official languages.



Think about keeping them in their place!

Daily brushing, flossing and regular visits to your dentist is the only way to ensure a beautiful smile for a lifetime.

Smile Canada is the theme for this year's National Dental Health Month. This April, take the time to care about your teeth. It may not be very exciting to brush and floss your teeth, to watch your diet and to see

your dentist but it does pay off. Nothing compares with a beautiful smile.

For more information on good dental care contact your dentist or the dental society in your area.

SMILE CANADA
Take the time to care.



Canadian Dental Association

d nts

e

Elles ont leur place; pensez-y bien!

La seule façon de conserver un beau sourire toute votre vie est de vous brosser les dents et d'utiliser la soie dentaire tous les jours et de visiter le dentiste deux fois par année.

"Sourions à pleines dents" est le thème du Mois national de la santé dentaire cette année. En avril, prenez le temps de vous occuper de vos dents. Se nettoyer les dents, surveiller son alimentation et rendre

visite au dentiste exigent sans doute des efforts, mais ces efforts valent la peine. En effet, rien n'égale un beau sourire.

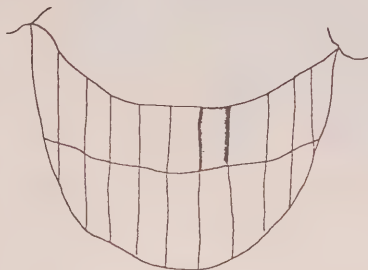
Pour plus de renseignements sur une bonne hygiène dentaire, veuillez communiquer avec votre dentiste ou avec la société dentaire de votre région.

**Songez-y, ayez soin
de vos dents!
Et souriez à pleines dents.**



L'Association Dentaire Canadienne

Dental Care is no laughing matter.



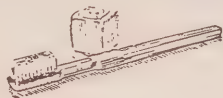
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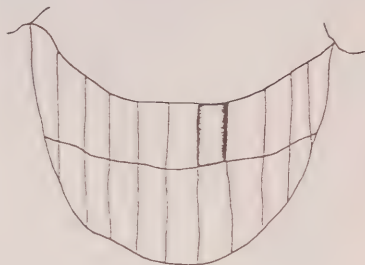
For more information on good dental care contact your dentist or the dental society in your area.

SMILE CANADA
Take the time to care.



Canadian Dental Association

L'hygiène dentaire y'a pas de quoi rire!



La seule façon de conserver un beau sourire toute votre vie est de vous brosser les dents et d'utiliser la soie dentaire tous les jours et de visiter le dentiste deux fois par année.

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Pour plus de renseignements sur une bonne hygiène dentaire, veuillez communiquer avec votre dentiste ou avec la société dentaire de votre région.

**Songez-y, ayez soin
de vos dents!
Et souriez à pleines dents.**



L'Association Dentaire Canadienne

June 20, 1983

MEDIA WORKSHOP

- New Brunswick -

Dentistry, like all other professions in the medical field is being questioned and investigated, particularly in the areas of contamination, radiation (x-rays) and many others.

With the electronic and print news media so readily and so persistently on the alert, it has become imperative that leaders of both provincial and national dental governing bodies be thoroughly knowledgeable and well versed in meeting with the media.

Official spokesmen for these governing bodies are now essential. Because of the public's need to know, we can no longer ignore issues and we now have a responsibility to answer all questions put forward by the media.

Also, with involvement of Government and other third parties, such as insurance companies, etc, we are also involved in negotiating with these groups.

In view of these current issues, C.D.A.'s Council on Information Services is now promoting and making available, a news media workshop. This workshop is designed to train dentists and lay people, who are involved with the administration of provincial Dental Societies or Associations, in how to conduct themselves and how to behave while being interviewed either on radio, television or by the print media. This two-day course is given by a team of professional journalists and television personnel.

.../2

The course has now been given in three different areas to the executive body of the C.D.A., the Manitoba Dental Association and recently the Atlantic Provinces Dental Society. (N.B., P.E.I., N.S.)

Without exception, the course was extremely well received and everyone is now convinced that such a course is essential, especially now that we are continuously probed by an inquisitive public and a well-versed and well-educated news media.

I can relate a recent personal experience where this course has had its benefit. In May of this year the New Brunswick Provincial Government, in its fiscal cut-backs withdrew from the public the entire Social Assistance Dental Program, leaving this province without any coverage whatsoever for these recipients. Naturally the New Brunswick Dental Society could not remain silent in front of such a drastic cut.

In a unprecedented move, the executive of the New Brunswick Dental Society called a press conference and in a very harsh statement condemned the Provincial Government for shying away from its responsibility. This press conference given by the president, Dr. R. Turcotte, the executive director, Dr. J. Thompson and myself Dr. Clement LeBlanc as chairman of the Negotiating Committee, was extremely well received by the news media. Society representatives were prepared and well informed which impressed the news media. I might add that this conference was so well presented that it forced the Government to re-consider its decision. At this date June 10, 1983, we are awaiting a reply.

Ironically, only two months ago all of us had taken this two-day media workshop. I cannot over emphasize the benefit that we all drew from this workshop and how well it served during these interviews, press conference, and the television appearance.

.../3

The reason I am stating this event as an example is not to flatter ourselves or to state how good we were but to emphasize to all other provincial governing bodies of our profession the importance and benefit of having your key people well prepared for similar or other awaiting issue.

Again may I stress that the Council on Information Services, of which I am a member, is strongly promoting and encouraging provincial governing bodies to have involved people take this course. It's money well spent and it is now essential that all our involved members be prepared for such events.

The Council is aiming to have all provincial bodies take this course within the next year. For any further information or if you are interested, please direct all inquiries to Mrs. Doris Goodwin, Director of Communications, CDA Headquarters, Ottawa, Ontario.

Clement S. LeBlanc, D.D.S.
Member
Council on Information Services

INSURANCE & INVESTMENT

REPORT OF THE CANADIAN DENTAL SERVICE PLANS INC. (COUNCIL ON INSURANCE & INVESTMENT) TO THE 1983 ANNUAL MEETING OF THE CDA BOARD OF GOVERNORS

Members of the C.D.S.P.I. Board of Directors are:

Dr. G. Anthony	- Atlantic Provinces
Dr. G.F. Copithorne	- British Columbia
Dr. R. Dupont	- CDA Representative for Quebec
Dr. C.R. Hill	- Manitoba and Saskatchewan
Dr. A.G. Leblanc	- Quebec
Dr. R.L. Moran	- CDA Representative for Ontario
Dr. R.L. Rasmussen	- Alberta - Chairman of the Board
Dr. R.R. Schiewe	- Ontario

Dr. J. Laporte	- CDA Executive Liaison
Dr. J.C. Giguere	- Vice-President Administration

Members of the Management Committee are:

Dr. J.E. Durran	- Burlington - President, CDSPI
Dr. R.L. Moran	- Toronto - Secretary-Treasurer, CDSPI
Dr. M.D. Charendoff	- Toronto - Member of Management Committee, CDSPI

The Board of Directors of CDSPI met on Friday, March 11, 1983, and on June 25, 1983.

Items of Business to be Discussed:

1. Renewal of the following contracts:

- a) Life
- b) Long Term Disability
- c) Office Overhead
- d) General Insurance Package
- e) Accidental Death and Dismemberment

2. Recommendations from the Loss Prevention Seminar

3. Participation Agreements

4. CDA/CDSPI Contract

1. Renewal of Insurance Contracts - (a) - (c)

Negotiations have taken place with Imperial Life with respect to the renewal for the three-year period commencing January 1, 1984.

The major negotiation area related to the interest rate that the Plan Reserve will attract over the next three years. When one considers that the Reserves are approximately \$14,000,000.00 and that the interest from those reserves could represent income to the Plans over the three year contract of approximately \$5,000,000.00 and that a difference of $\frac{1}{8}\%$ represents approximately \$70,000.00 per year, it becomes very important to realize the maximum possible return in the safest manner.

This renewal package was presented to the CDSPI Board of Directors on June 25.

RESOLVED:

83.55 *THAT the CDA approve a renewal of the Imperial Life Insurance Company contract for a new three-year period January 1, 1984 to December 31, 1986; and further*

THAT such contract renewal will contain such terms as outlined in Appendix A attached to and forming part of this report.

ADOPTED

- (d) A complete review of the General Insurance Package (Malpractice, Business Interruption, Office Contents, Comprehensive General Liability) held by Guardian Insurance Company for a new one year contract commencing January 1, 1984 has taken place.

Malpractice premiums have doubled for 1984. The experience of the Malpractice program warrants such an increase. Many changes to the program were discussed with the Insurer and our Consultants relating to ways of improving the experience and properly accounting for continual users of the coverage.

RESOLVED:

83.56 *THAT the CDA approve a renewal of the Guardian Insurance Company contract for a one year period commencing January 1, 1984, such renewal to be based on the following new terms, rates and conditions:*

continued...

Malpractice: (continued)

1. THAT the net premium per dentist for 1984 be \$312.14 (\$359 gross rounded to \$360 gross);
2. THAT the auxiliary premium level for 1984 will remain the same as the 1983 level - \$13.84 for \$500,000 coverage, \$19.40 for \$1,000,000 coverage;
3. THAT the gross premium for \$2,000,000 coverage in 1984 be \$390.00;
4. THAT the current 90 day cancellation notice by the insurer be retained unless cancellation is for non-payment, fraud, or misrepresentation, in which case fifteen days applies. (There is no change in this from current coverage);
5. THAT the repeater deductible as outlined in this report being \$2,000 with respect to each claim commencing on the third claim, subject to a \$20,000 annual aggregate deductible applicable to all fees as well as the amount paid to third parties, not applicable to retirees or estates, and not counting as a claim where there is no payment to a third party, be included in the policy wording for the 1984 renewal;
6. THAT a two year "guaranteed non-cancellable" period, where Guardian agrees to not cancel any retiree or estate coverage, without the consent of CDSPI (CDA) be part of the 1984 renewal.

ADOPTED

Comprehensive General Liability

RESOLVED:

- 83.57 THAT a gross premium of \$73.08 per dentist be charged for General Liability Insurance for the premium year 1984.

ADOPTED

Business Interruption

RESOLVED:

- 83.58 THAT a gross premium of \$2.36 for each \$1,000 unit be charged for the premium year 1984 as in 1983.

ADOPTED

Office Contents

RESOLVED:

- 83.59 THAT the 1984 Office Contents premium be increased an overall 16.08% of the present rate, and be allocated equitably to fire restrictive locations and locations of other constructions based on an analysis of the participation; and further

THAT the 180 day notice period on individual certificates for other than Malpractice coverage for 1984 remain in force.

ADOPTED

RESOLVED:

- 83.60 THAT the CDA approve a renewal of the Accidental Death and Dismemberment contract with Seaboard Life Insurance Company for a new three year period January 1, 1984 to December 31, 1986 with no change of current rate or coverage.

ADOPTED

2. Recommendations from the Loss Prevention Seminar

The Loss Prevention Seminar "Prevent and Protect" was held on June 24, 1983 in Toronto. Representatives from each Licensing Body/ Provincial Association in Canada were in attendance. (Agenda copy attached as Appendix E.)

The response to the Seminar was enthusiastic and participation and suggestions were welcomed and helped make the program successful.

Recommendations from the Seminar were discussed at the CDSPI Board meeting on June 25, 1983 and are attached (Appendix B).

The Board of Directors of CDSPI recommends to the CDA Board of Governors:

- 83.61 THAT the recommendations with regard to Loss Prevention Policies emanating from the Loss Prevention Seminar be presented to the CDA for consideration.

Executive Council Comment: The Executive Council considered the recommendations submitted by the CDSPI Board of Directors and these have been dealt with in the report of the Executive Council.

In relation to Recommendation No. 5, this is presented to the CDA for discussion. CDSPI recognized the rights of the individual corporate bodies and further recognized that the individual provinces may wish to deal with this subject on an individual basis. Recognizing the difficulties which may occur we recommend that Item No. 5 in the recommendations be accepted in principle.

3. Participation Agreements

The CDSPI Board of Directors approved the proposed Participation Agreements at their June 25th meeting. The agreements contain restrictions which pertain to some Provincial activities. These agreements are attached as Appendix C to this report.

RESOLVED:

- 83.62 *THAT the CDA approve the Agreements and arrange to complete the signing of such agreements by all current co-sponsors and return them to CDSPI prior to December 31, 1983.*

ADOPTED

4. CDA/CDSPI Contract

The CDA/CDSPI Contract is attached as Appendix D.

RESOLVED:

- 83.63 *THAT the CDA approve and ratify the proposed contract between the CDA and CDSPI, and that such signed copies of the agreement be returned to CDSPI prior to December 31, 1983.*

ADOPTED

Items of Business for Information:

1. CDA Registered Retirement Savings Plan

The transfer of the RRSP Funds from Royal Trust to Imperial Life Insurance Company took place on June 1. As a matter of interest, it was necessary for CDSPI staff to make personal phone calls to over 25% of the RRSP participants who had, for one reason or another, not signed the Consent to Transfer Form. This was necessary, in spite of the fact that they were plainly informed that it was in their own interests to either sign or give CDSPI another direction as to their intentions.

CDA Registered Retirement Savings Plan - continued

The Management Committee met with the Portfolio Managers of Imperial Life on June 14 in order to review the investment objectives and strategy for all four types of funds.

The transfer to Imperial Life will permit the CDA to adopt a more aggressive stance towards promotion of a good member service.

2. Benefit Committee Chairmen

A meeting was held in Toronto on March 12 for all Benefit Committee Chairmen and the Directors of CDSPI. This meeting is organized and conducted by our Director of Plans, Mr. C. Gallant, and is a valuable experience for both guests and hosts. A critique form is provided and the comments from the Chairmen are very positive. There seems to be some feeling that a per diem should be paid for attendance which is a matter that will come up for discussion at the CDSPI Board of Directors meeting and possible recommendation to the CDA.

3. In-House Administration

The program is on schedule and within the budget. Obviously, success of the change will be measured by the lack of any apparent difference at the time of the first billing of 1984. CDSPI is optimistic about 1984.

4. Non-Smokers Insurance

The premium rates for this coverage will take effect January 1, 1984. All dentists participating in the Life program will be receiving a Declaration of Eligibility in September which they must sign and return by October 15 in order to have the advantage of the rates.

This Declaration must be renewed every five years at the time of the step rate change in the person's Life premium. After January 15, 1984, all new applicants can select this rate and any others can do so also if they qualify.

5. CDSPI Board Member Changes

CDSPI welcomes two new members to the Board of Directors. Dr. A. Leblanc is now representing the Province of Quebec. His experience as Chairman of the Insurance Committee of the Q.D.S.A. will permit him to make a practiced contribution to the deliberations of the Board.

CDSPI Board Member Changes - continued

Dr. R.R. Schiewe now representing the Province of Ontario, is a Past-President of the ODA and anyone who is familiar with the demands of that position will understand that he will be a productive Board member.

6. Actuarial Audit

The CDSPI Board of Directors approved the conduct of an Actuarial Audit of the CDA Group Insurance Plan as underwritten by Imperial Life. The terms of reference of the audit were as follows:

- to verify the accuracy of premium and claims data
- to examine the insurer's calculations of all retained expenses and charges to ensure that they agree with the retention agreement between CDA and Imperial Life
- to verify the interest calculations for accuracy
- to examine the Life and Disability reserves with a view to possible changes
- to analyze past financial experience to ensure that premium rates are fair
- to analyze the rate stabilization reserves and surplus funds of the Plans as held by Imperial Life.

The conclusions of the consulting firm of Towers, Perrin, Forster & Crosby is attached as Appendix F.

It is apparent that the audit portion of the assignment found no errors or omissions; however, some of the other recommendations will require further study.

7. Plan Experience

The first quarter of 1983 was positive for all three benefit areas - Life, LTD, and Office Overhead (Appendix G). This is particularly promising with respect to the Long Term Disability experience. That plan has had a history of poor first quarters and subsequent improvement through the other three quarters. This year gives the plan a head start.

New * application statistics at May 31, 1983 as compared to 1982 and 1981 by Plan are included in this report as Appendix H (by number of applications to Premium \$)

*Relates to new complete coverage and coverage increases.

Summary and Conclusions

Since this is the CDSPI Report to the CDA Annual Meeting, I would like to take a moment to express our appreciation for the co-operation that we have received during the last seven years. I refer to the last seven years because it has been that long since CDA, at the recommendation of a joint CDA/CDSPI Ad Hoc Committee, requested CDSPI to act as Council on Insurance and Investment.

We have enjoyed the trust and co-operation and we look forward to continued achievement in our designated areas.

Respectfully submitted,

J.E. Durran, D.D.S.,
President,
Canadian Dental Service Plans Inc.
Council on Insurance & Investment

ADOPTION OF REPORT

The Board accepts the Report of the Council on Insurance and Investment with appreciation.

Appendix A(1)

IMPERIAL LIFE INSURANCE COMPANY CONTRACT RENEWAL

RECOMMENDED TERMS AND CONDITIONS

(*REFERS TO A CHANGE FROM CURRENT CONTRACT)

1. "THAT THE CURRENT PREMIUM RATE STRUCTURE REMAIN IN FORCE FOR LIFE, ..
DEPENDENT LIFE, LTD AND OFFICE OVERHEAD, INCLUDING LIFE NON-SMOKERS AS
PREVIOUSLY APPROVED.
2. * THAT THE FOLLOWING CONSTITUTES RETENTION CHARGES:
 - (a) UNDERWRITING EXPENSE TO INCREASE TO \$36.60 PER APPLICATION PLUS
ACTUAL MEDICAL EXPENSE, TO BE SPLIT EQUALLY IF BOTH LIFE AND
DISABILITY ARE CONCURRENTLY APPLIED FOR.
 - (b) A CHARGE OF \$600 PER CONTRACT AMENDMENT.
 - (c) A CHARGE OF \$150 PER WAIVER CLAIM IF LTD COVERAGE IS NOT
PROVIDED AND INCREASE THE CHARGE PER LTD CLAIM TO \$150 AND COST
PER CHEQUE TO \$20
 - (d) ALL OTHER RETENTION COSTS THAT ARE EXPRESSED AS A PERCENTAGE OF
PREMIUM REMAIN UNCHANGED; AN ANNUAL INCREASE OF DOLLAR CHARGES
LIMITED TO THE LESSER OF THE CPI OR 12%.
3. * (a) THAT ALL RESERVES ARE TO BE MONITORED CLOSELY BY THE INSURANCE
CONSULTANT AND BROUGHT TO THE MOST CURRENT CALCULATION LEVEL
AND/OR ASSUMPTIONS, WITH THE RESULT OF REDUCING OF RESERVES
AND MAXIMIZING ALL PLAN SURPLUSES.
 - (b) THE HOLDING OF AN INCURRED BUT NOT REPORTED (IBNR) RESERVE IS TO
BE WAIVED FOR BOTH LIFE AND LTD AS LONG AS THE RATE STABILIZATION
RESERVE EXCEEDS THE REQUIRED LEVEL OF THE IBNR.
4. * THAT THE PLAN LIMITS WILL BE AS FOLLOWS:

GROUP LIFE	\$500,000 (\$410,000 EFFECTIVE JANUARY 1, 1984)
LONG TERM DISABILITY	\$5,000
OFFICE OVERHEAD	\$8,000
DEPENDENT LIFE	\$100,000 (NO CHANGE)

Appendix A(2)

5. * THAT GROUP LIFE INSURANCE MAXIMUMS AFTER AGE 65 WILL BE AS FOLLOWS:

<u>AGE</u>	<u>COVERAGE AMOUNT</u>
65 - 69	The lesser of \$134,000 and 50% of pre-65 coverage
70 - 74	The lesser of \$35,000 and 50% of pre-70 coverage
75 - 79	The lesser of \$15,000 and 50% of pre-75 coverage

6. * THAT DEPENDENT LIFE MAXIMUM TO AGE 65 IS \$100,000. BETWEEN AGES 65 AND 70, THERE WILL BE AN AUTOMATIC EXTENSION OF THE COVERAGE TO BE THE LESSER OF \$10,000 OR THE PRE-65 COVERAGE.
- 7.(a) THAT THE WAIVER OF PREMIUM ELIMINATION PERIOD REMAIN AT 6 MONTHS FOR BOTH THE LIFE AND DISABILITY PLANS.
- (b) THAT THE MAXIMUM ELIGIBLE AGE FOR WAIVER OF PREMIUM REMAINS AT AGE 65.
8. * THAT ALL AGE CALCULATIONS FOR LIFE, DEPENDENT LIFE AND DISABILITY PLANS WILL BE BASED ON "AGE ON JANUARY 1" OF EACH YEAR BASIS.
9. * THAT THERE WILL BE NO CROSS RATING BETWEEN BASIC LIFE SURPLUS AND THE DISABILITY PLANS.
10. THAT ANY PORTION OF A PARTICIPANT'S LIFE OR DISABILITY POLICY CAN BE REDUCED AT THE REQUEST OF THE INSURED. IF A PART OF A BASIC LIFE POLICY IS REQUIRED FOR COLLATERAL, THE INSURER WILL ONLY REGISTER AN ASSIGNMENT ON THAT PART, AS REQUIRED.
11. * THAT THE FOLLOWING INTEREST FORMULA BE ADOPTED:
- GIC 1 YEAR RATE PLUS $\frac{1}{2}\%$ ON RATE STABILIZATION RESERVE
 - GIC 3 YEAR RATE ON SURPLUS AND ACTUARIAL LIABILITIES WITH THE 3 YEAR RATE BEING DETERMINED AS THE AVERAGE FOR THE JULY 1 - JUNE 30 PERIOD IMMEDIATELY PRECEDING THE TIME OF CALCULATION
 - THAT GROWTH TO THE FUND BE SET UP AS SEPARATE YEARLY FUNDS EARNING THIS AVERAGE 3 YEAR GIC RATE
 - ALL RATES COMPOUNDED ANNUALLY.
- And, further:
- THAT THE CASH FLOW WILL BE CREDITED ON THE BASIS OF 90 DAY TREASURY BILL RATE.
12. * THAT A \$200,000 POOLING LEVEL BE ESTABLISHED - PREMIUM COST 13.5% OF GROSS PREMIUM; SUCH POOLING PERCENTAGE TO BE REVIEWED ANNUALLY.

CDSPI LOSS PREVENTION SEMINAR

RECOMMENDATIONS TO THE CANADIAN DENTAL ASSOCIATION

That the CDA:

1. Give a high priority to the development and promotion of a Loss Prevention Program on a National basis.
2. Develop standard material for distribution through the Licensing Bodies to the members of the profession; such material to outline the problems and recommend methods of Loss Prevention.
3. Inform the profession on "Risk Management" in the individual practices and educate the practising dentist in the art of avoiding malpractice claims.
4. Develop a national concept of "Informed Consent" to include a nationally recognized "Informed Consent" form for use by all dentists.
5. Disseminate information on claims and repeat offenders to the Licensing Bodies on a regular basis, through careful monitoring of the program by CDSPI.

That the Licensing Bodies:

6. Give a high priority to Loss Prevention on a Provincial basis.
7. Take appropriate action to inform their members when information on loss prevention is received.
8. Attempt to standardize procedures for the handling of complaints and take the responsibility for those situations where remedial dental care is recommended, subject to the provisions of the individual provincial statutes.
9. Be regularly informed about statistical information regarding claims occurring and trends developing in their respective provinces.
10. Insist on a high ethical standard relating to criticism of one dentist by another.
11. Commit to:
 - (a) Careful monitoring of the membership in each province
 - (b) Contribute toward the development of Loss Prevention material
 - (c) Communicate this material to their members
 - (d) Communicate regularly with CDSPI relating to the occurrence and management of their local problems.

DRAFT 19/05/83

PARTICIPATION AGREEMENT

AGREEMENT made as of January 1, 1984 between CANADIAN DENTAL ASSOCIATION ("CDA") and (the "Co-Sponsor").

WHEREAS:

A. CDA, on behalf of itself and participating provincial dental organizations, is the sponsor of certain insurance plans and programs in which members of the Canadian dental profession and their families and employees may participate; and

B. the Co-Sponsor wishes to participate in the sponsorship of one or more of the insurance plans and programs so sponsored by CDA;

NOW THEREFORE THIS AGREEMENT WITNESSETH that in consideration of their covenants and agreements herein contained the parties covenant and agree as follows:

1. Definitions

In this agreement:

(a) "Carrier" means, with respect to any Plan, the issuer of the master policy or other agreement embodying such Plan or the insurer

or other person with which CDA has entered into contractual or other relations providing for such Plan;

(b) "Carriers' Agreements" means agreements entered into from time to time among CDA, CDSPI and the Carriers pursuant to which CDSPI is authorized to perform certain administrative services on behalf of the Carriers and CDA in connection with the Plans;

(c) "CDSPI" means Canadian Dental Service Plans Inc.;

(d) "Participant" means, at any time with respect to any Plan, an individual who, at such time, is participating in such Plan or who is entitled to benefits thereunder;

(e) "Participating Organization" means, at any time with respect to any Plan, a provincial dental organization which at such time is participating in the sponsorship of such Plan through agreement with CDA;

(f) "Plan" means, at any time, an insurance plan or program which is being sponsored by CDA on behalf of itself and each Participating Organization which at such time is participating in the sponsorship thereof; and

(g) "Sponsored Plan" means, at any time, a Plan in the sponsorship of which the Co-Sponsor is participating at such time.

2. Participation

Subject to termination pursuant to section 3, the Co-Sponsor:

(a) shall participate in the sponsorship of each of the Plans listed in Schedule A; and

(b) shall be entitled to commence to participate from time to time in the sponsorship of any other Plan from such date and upon such terms and conditions as may be agreed at that time by CDA and the Co-Sponsor.

3. Termination of Participation

The Co-Sponsor shall be entitled to terminate its participation in the sponsorship of any Sponsored Plan upon giving written notice to CDA not less than 180 days (or such shorter period as CDA may agree) prior to the renewal date of such Plan in which it proposes to cease to so participate.

4. Communication of Plans

CDA shall, from time to time, furnish the Co-Sponsor with copies of all announcements, explanatory booklets, newsletters and other descriptive and promotional literature with respect to each Sponsored Plan prepared and distributed to Participants and potential Participants by CDSPI in accordance with the provisions of the Carriers' Agreements and shall arrange for representatives of

the Carrier or CDSPI to attend conventions, conferences and meetings of members of the Co-Sponsor to provide information relating to the Sponsored Plans.

5. Statements

CDA shall deliver or shall cause CDSPI to deliver on its behalf, to the Co-Sponsor, annual statements for each Sponsored Plan setting out:

- (a) the enrollment statistics for the Plan;
- (b) a summary of all amounts received and disbursed in connection with the Plan;
- (c) details, as furnished by the Carrier of the Plan, of all claims made and/or paid thereunder; and
- (d) information, as furnished by the Carrier of the Plan, with respect to the claims, retention expenses, interest, reserves, contingency funds and surplus or deficit of the Plan.

Such information shall be provided for:

- (i) the group consisting of all the Participants in the Plan;
and
- (ii) the group consisting of the Participants in the Plan who are participating therein as members of the Co-Sponsor.

The Co-Sponsor shall keep such statements confidential but shall be entitled to make use of them or any information contained in or derived from them in connection with negotiating and arranging alternative coverage to replace a Sponsored Plan in which it ceases to participate pursuant to section 3.

6. Surpluses

In directing and controlling the administration of the Plans CDA, through its Executive Council, shall adopt the policy of making use of surpluses arising under any Plan for the benefit of such Plan and the Participants therein through the reduction of premiums, the improvement or addition of benefits, the payment of dividends or otherwise.

7. Promotion

Subject to the guidance and control of CDA and CDSPI the Co-Sponsor shall promote the Sponsored Plans and encourage its members to become Participants therein. In this connection the Co-Sponsor shall:

- (a) facilitate the distribution to its members of announcements, booklets, application forms, newsletters and other descriptive and promotional literature with respect to the Sponsored Plans prepared by CDSPI pursuant to the Carriers' Agreements;
- (b) assist in arranging meetings to permit the presentation of the Sponsored Plans to its members;

(c) facilitate the presentation of the Sponsored Plans at conventions, conferences and meetings of its members and, in connection therewith, permit representatives of the Carriers and CDSPI to participate in the programs and allocate facilities to them where they can be contacted by attending members;

(d) forward to the Carrier of each Sponsored Plan or CDSPI all enquiries regarding coverage, premiums and claims thereunder and where appropriate assist in resolving any complaints or other difficulties arising in connection therewith; and

(e) assist in arranging for articles and advertisements with respect to the Sponsored Plans in its publications.

Any announcements, booklets and other descriptive and promotional literature prepared at any time by the Co-Sponsor with respect to a Sponsored Plan shall not be distributed to the Participants or potential Participants in such Plan until it has been reviewed and approved for distribution by CDSPI and the Carrier. The Co-Sponsor shall not advertise or otherwise promote among its members any insurance plan which provides coverage which is similar to that provided under a Sponsored Plan and, without limiting the generality of the foregoing, the Co-Sponsor shall not permit representatives of the carrier of any such similar plan to promote such plan among members of the Co-Sponsor at any convention, conference or meeting at which a representative of a Carrier or CDSPI is in attendance for the purpose of providing information relating to the Sponsored Plans.

8. Benefit Committee

The Co-Sponsor shall elect or appoint from among its members a group or committee which shall have primary responsibility for discharging the obligations of the Co-Sponsor under this agreement and shall make such studies and perform such research as may be necessary to permit it to keep CDSPI and CDA fully informed regarding the needs and concerns of the members of the Co-Sponsor with regard to Plans and possible new Plans.

9. Term

This agreement shall remain in full force and effect for so long as the Co-Sponsor continues to participate in the sponsorship of one or more Plans.

10. Notices, etc.

Any notice, approval, authorization or other communication to be given pursuant to this agreement to either party shall be in writing and shall be deemed to have been duly given if delivered in person to the President, Chairman or Secretary of such party or, except during a period of general discontinuance of postal service, mailed by pre-paid registered mail addressed:

(a) if to CDA, to it at:

1815 Alta Vista Drive,
Ottawa, Ontario.
K1J 3Y6

marked to the attention of its Secretary or to such other address as CDA shall specify by notice to the Co-Sponsor; and

(b) if to the Co-Sponsor, to it at:

marked to the attention of its Secretary or to such other address as the Co-Sponsor shall specify by notice to CDA;

and shall be deemed to have been given on the day of delivery or, except during a period of general discontinuance of postal service, on the seventh business day following mailing.

11. Successors and Assigns

This agreement shall enure to the benefit of and be binding upon the parties hereto and their respective successors and assigns.

IN WITNESS WHEREOF the parties hereto have duly executed this agreement.

THE CANADIAN DENTAL ASSOCIATION

By: _____

(name of Co-Sponsor)

By: _____

SCHEDULE A
Sponsored Plans

Basic Life Insurance
Dependents' Life Insurance
Accidental Death and Dismemberment Insurance
Long Term Disability Insurance
Office Overhead Expense Insurance
Business Interruption Insurance
Office Contents Insurance
General Liability Insurance
Malpractice Insurance*

*Not applicable in Ontario.

DRAFT 19/05/83

AGREEMENT

AGREEMENT made the 1st day of January, 1981 between THE CANADIAN DENTAL ASSOCIATION ("CDA") and CANADIAN DENTAL SERVICE PLANS INC. ("CDSPI")

WHEREAS:

A. CDA, on behalf of itself and participating provincial dental organizations, is the sponsor of certain insurance plans and programs in which members of the Canadian dental profession and their families and employees may participate; and

B. CDA wishes to delegate to CDSPI the functions relating to such plans and programs formerly performed by its Council on Insurance and Investment.

NOW THEREFORE THIS AGREEMENT WITNESSETH THAT in consideration of the sum of \$10.00 now paid by CDA to CDSPI, the receipt and sufficiency whereof are hereby acknowledged, CDSPI agrees as follows:

1. CDSPI shall, subject to the provisions of the agreements entered into among CDA, CDSPI and the insurance carriers of the insurance plans and programs sponsored by CDA, provide the following services to CDA:

(i) recommend to the Executive Council of CDA the kinds of insurance and terms of coverage which are desirable for the membership of CDA to carry and which can be advantageously purveyed to the membership of CDA and other provincial dental associations on a group basis;

(ii) survey the insurance market to determine the costs, terms and conditions of available coverage;

(iii) negotiate and recommend for approval to the Executive Council of CDA the costs, terms and conditions of contracts with the chosen insurance carriers;

(iv) periodically review the insurance contracts in order to determine the suitability of contracts and the possibility of improved terms and of more economic terms and assess the proposals of competing carriers;

(v) recommend to the Executive Council of CDA the time and manner of distribution of surplus or reserve funds; and

(vi) advise on and review CDA sponsored pension and retirement savings plans.

2. CDSPI may arrange for any of such services which it is prohibited by provincial legislation from performing to be performed on behalf of CDA, CDSPI or the insurance carriers by licensed or registered insurance agents or brokers.

3. CDSPI shall, prior to CDA's annual meeting in each year, provide to CDA a report relating to the services provided by it during the preceding year to CDA.

IN WITNESS WHEREOF the parties hereto have caused this Agreement to be signed by their duly authorized officers and their corporate seals to be thereunder affixed as of the day and year first above written.

THE CANADIAN DENTAL
ASSOCIATION

by: _____

CANADIAN DENTAL SERVICE
PLANS INC.

by: _____

PREVENT AND PROTECT

LOSS PREVENTION SEMINAR

SPONSORED BY CANADIAN DENTAL SERVICE PLANS INC.

SUTTON ROOM "A", BRISTOL PLACE HOTEL,
950 DIXON ROAD, TORONTO INTERNATIONAL AIRPORT,
REXDALE, ONTARIO.

FRIDAY, JUNE 24, 1983

AGENDA

Tab. No.

- | | |
|---|---|
| 1 | 8:00 a.m. - 8:45 a.m.

BUFFET BREAKFAST -
Registration prior to Breakfast in foyer opposite
Room that breakfast is held in |
| 2 | 9:00 a.m. - 9:10 a.m.

WELCOME TO SEMINAR - Dr. R.L. Rasmussen,
Chairman of Board of Directors of CDSPI
introduces Chairman of the Seminar.

Dr. J.E. Durran, President of CDSPI, as Chairman of
the Seminar conveys welcome to attendees and states
objective of the meeting |
| 3 | 9:10 a.m. - 9:20 a.m.

STATISTICAL REVIEW
Chairman of the Seminar
Capsule review of statistical material contained in
Seminar Book, highlighting specific areas and trends |

Tab. No.

4

9:20 a.m. - 10:30 a.m.

"WHAT'S IN THE WORLD OF CLAIMS"

Roger Potts, Guardian Insurance Company
Claims Administrator

Don Whitmore - Sr. Vice President, H B Group
Insurance Management Limited

Dr. Ted Fox, Deputy Registrar, Royal College of
Dental Surgeons of Ontario

- An overview of claims being experienced by the
Plan and in Ontario
- Review of current claims procedures and problems
that are encountered by the Insurer
- Questions from the floor to panelists

10:30 a.m. - 10:45 a.m.

Coffee

5

10:45 a.m. - 12:00 noon

INFORMED CONSENT

Beth Moore - Campbell, Godfrey & Lewtas, Barristers
and Solicitors

Gavin MacKenzie - Campbell, Godfrey & Lewtas,
Barristers and Solicitors

Jeffrey Leon - Campbell, Godfrey & Lewtas
Barristers and Solicitors

Dr. R. Moran - CDSPI Board of Directors

A review of articles on Informed Consent and a
proposed Consent Form are highlighted.
Two lawyers in opposing positions (prosecution vs.
defending) will enact a trial segment relating to a
case involving Informed Consent.
Meaning of Informed Consent as viewed by a Trial
Judge.
Questions from the floor to panelists.

12:00 noon - 1:15 p.m.

Lunch - Bristol Room

Tab. No.

- 6 1:15 p.m. - 2:15 p.m.
- "DON'T SAY SUE ME"
- Barry S. Wortzman, Q.C.,
- Shibley, Righton & McCutcheon, Barristers and
- Solicitors
- A review of the Do's and Don'ts of how to handle a
- patient and avoid a claim - A RISK MANAGEMENT
- PRESENTATION.
- Questions from the floor to speaker.
- 7 2:15 p.m. - 2:30 p.m.
- CDSPI - AS WE SEE IT!
- Chairman of the Seminar will present a summary of the
- objectives of the Seminar, the problem as perceived
- and the commitments required to launch a successful
- ongoing Loss Prevention Program.
- 2:30 p.m. - 3:00 p.m.
- Coffee
- 8 3:00 p.m. - 4:45 p.m.
- PROVINCIAL ROUNDUP
- An open forum discussion period where each province
- presents further comments to those already given in
- their questionnaire, and summarizes their position and
- commitment.
- 9 4:45 p.m. - 5:00 p.m.
- CLOSING REMARKS
- Dr. Mel Charendoff - CDSPI Management Committee
- 10 GENERAL INFORMATION

III. CONCLUSIONS

Following is a summary of our conclusions from the analyses discussed in Section II of the report:

1. Premium and claim reporting by Imperial Life has been verified. Final audit checks of the premiums and claims data flowing from CDSPI to Imperial Life will be completed shortly.
2. Retention expenses that have been charged in the past have been in accordance with the agreements. With minor exceptions that are discussed in the report, Imperial Life's proposals for the basis of the future retention agreement are reasonable and competitive.
3. Interest calculations were verified. We recommend that investigations should be made as to whether the gross fund could be managed on a segregated investment basis. This change would afford CDA with the opportunity to realize investment profits that undoubtedly have accrued to Imperial Life in the past.
4. Agreement has been reached with Imperial Life to lower the required reserves under the Plan by substantial amounts. These changes will significantly increase the surplus levels under the Plan. The final determination of appropriate reserve levels is subject to continued negotiation by TPP&C with the insurer.
5. We recommend that Life insurance premiums be decreased by 10%, and by further amounts if it is decided by CDA to apply existing surpluses. Disability rates should be retained at present levels, and an investigation should be made of the deteriorating claims trend on the disability insurance.
6. Rate Stabilization Reserves will be effectively reduced under the Plan. All elements of cross-rating between the Life and disability coverages should be eliminated.

TPP&C

7. We recommend that large amount pooling, as opposed to stop-loss pooling, should be used on the Life account but at a much higher pooling level than is used presently. Disability insurance should not be subject to pooling unless the maximum benefit levels are significantly increased.

TPRC

CANADIAN DENTAL ASSOCIATION
LIFE EXPERIENCE REPORT

	1983			
	March	June	September	December
Earned Premium to date	\$ 413,495			
Less: claims paid to date	278,000			
<u>Change in Reserves</u>				
- Level premium reserve	3,391			
- Ext. death benefits reserve	3,476			
- Incurred but not reported claims reserve	(6,535)			
- Rate Stabilization Reserve	-			
Sub-total	135,163			
Less: <u>Retention Charges:</u>				
- Administration - Imperial	2,697			
- Administration - (C.D.S.P.I.)	53,961			
- Premium tax	8,200			
- Profit and Contingency	2,697			
- Other Charges	9,439			
Plus: Interest Credit	141,324			
<u>Result of total operation</u>	199,493			

SUMMARY

<u>Annualized Premiums</u>	1,658,285
Level Premium Reserves	314,776
Ext. death benefits reserves	1,028,821
I.B.N.R. Claims Reserve	248,743
Total Reserves	1,592,340
Rate Stabilization Reserve	850,928
Experience Surplus	631,276
Investment Surplus	2,465,555
<u>Contingency Reserve</u>	3,947,759

CANADIAN DENTAL ASSOCIATION

L.T.D. EXPERIENCE REPORT

	1983			
	March	June	September	December
Earned Premium to date	\$ 867,865			
Less: claims paid to date	566,876			
<u>Change in Reserves</u>				
- Incurred but not reported claims reserve	(15,606)			
- Open Claims Reserve	(96,612)			
Sub-total	413,207			
<u>Less: Retention Charges:</u>				
- Administration - Imperial	5,660			
- Administration - (C.D.S.P.I.)	113,256			
- Premium tax	11,679			
- Underwriting fees	5,799			
- Medical expense fess	4,694			
- Claims administration	12,613			
- Profit and Contingency	9,433			
- Other Charges	-			
Plus: Interest Credit	175,388			
<u>Result of total operations</u>	425,461			

SUMMARY

<u>Annualized Premiums</u>	3,359,823
I.B.N.R. Claims Reserve	671,965
Open Claims Reserve	5,434,600
Total Reserves	6,106,565
Rate Stabilization Reserve	973,141
Transfer from Citadel	245,753
<u>Graduates Coverage</u>	

CANADIAN DENTAL ASSOCIATION
OFFICE OVERHEAD EXPERIENCE REPORT

	1983			
	March	June	September	December
Earned Premium to date	\$ 366,758			
Less: claims paid to date	178,259			
<u>Change in Reserves</u>				
- Incurred but not reported claims reserve	(1,596)			
- Open Claims Reserve	138,158			
Sub-total	51,937			
<u>Less: Retention Charges:</u>				
- Administration - Imperial	2,392			
- Administration - (C.D.S.P.I.)	47,862			
- Premium tax	4,936			
- Underwriting fees	2,451			
- Medical expense fees	1,983			
- Claims administration	5,330			
- Profit and Contingency	3,986			
- Other Charges	-			
Plus: Interest Credit	58,428			
<u>Result of total operations</u>	41,425			

SUMMARY

<u>Annualized Premiums</u>	1,419,854
I.B.N.R. Claims Reserve	283,970
Open Claims Reserve	356,344
Total Reserves	640,314
Rate Stabilization Reserve	1,818,685
<u>Graduates Coverage</u>	

Appendix H

New * Application Statistics at May 31, 1983
as compared to 1982 and 1981 by Plan
(by No. of Applications to Premium \$)

	1983		1982		1981	
	<u>Number</u>	<u>Premium \$</u>	<u>Number</u>	<u>Premium \$</u>	<u>Number</u>	<u>Premium \$</u>
Life	370	\$ 102,362	472	\$ 131,206	416	\$ 91,767
Dep. Life	91	8,267	90	8,747	91	7,549
A D & D	203	11,216	300	17,585	274	15,338
LTD	442	183,872	609	242,290	519	188,930
Office Overhead	272	87,880	264	96,447	285	73,586
Office Contents	239	48,608	205	50,137	206	37,752
Bus. Interruption	156	16,308	139	13,537	161	12,999
General Liability	153	6,243	211	1,412	150	878
Malpractice						
- Basic	129	19,995	252	22,117	197	15,215
- Excess	<u>253</u>	<u>7,084</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
TOTAL	<u>2,308</u>	<u>\$ 491,835</u>	<u>2,542</u>	<u>\$ 583,478</u>	<u>2,299</u>	<u>\$ 430,214</u>

* Relates to new complete coverage and coverage increases.

NOMINATIONS

REPORT OF THE COUNCIL ON NOMINATIONS TO THE 1983 CDA BOARD OF GOVERNORS

Members: Dr. D.E. Williams, Chairman
Dr. R.L. Moran
Dr. J.F. Reid
Dr. G.E. Utas

1. Council did not meet during the term; business was conducted by correspondence and telephone.
2. Solicitation of nominations for elective offices and vacancies was conducted in accordance with the by-laws and terms of reference of the Council.
3. All elective offices and vacancies for the 1983 - 1984 term have been filled by eligible nominees.
4. Elections are to be held during the annual meeting of the Board of Governors in Vancouver, B.C., September 23 - 24, 1983.
5. The nominations form was revised to comply with resolution 82.90 that requires the nominator to notify the candidate's provincial association of such action, identifying the candidate and the office, council or committee to which he was nominated.
6. Elections will be required as indicated in the appended table.
7. **RESOLVED:**

APPENDIX A

83.64 *THAT one ballot be cast to elect those candidates to offices and vacancies where no opposition exists.*

ADOPTED

8. The call for nominations, the nomination form and the list of nominees with biographical information are appended and comprise part of this report.
9. Council expresses appreciation to the nominators for their assistance in providing nominees, to the candidates for their willingness to serve and to the staff for their assistance.

APPENDIX B
APPENDIX C
APPENDIX D

Respectfully submitted

Donald E. Williams,
Chairman

ADOPTION OF REPORT:

The Board accepts the Report of the Council on Nominations with thanks.

Addendum

RESOLVED:

- ADOPTED

RESOLVED:

- ADOPTED

ADOPTED

ADOPTED

NOMINATIONS
CDA ELECTIVE OFFICES - 1983
Election Required*

OFFICE/INCUMBENT	COMMENT	ELIGIBILITY	TERM	NOMINEES - AFFILIATIONS
<u>Chairman of the Board</u> Dr. N.A. Mancini (Ontario)	Elected Annually	Active or Honorary Member	1 year	Dr. N.A. Mancini
<u>President-Elect</u> Dr. R.N. Hicks (B.C.)	Elected Annually	Member of Board of Governors	1 year	Dr. P.R. Crawford (Manitoba)
<u>Executive Council</u> Dr. D.L. Thompson - 1983(2) Alta. Dr. P.R. Crawford - 1983(1) Man. Dr. J. Laporte - 1983(1) Que.	Annual election to fill expired terms	Member of Board of Governors	3 year	Dr. J. Laporte (Quebec Prov.) Dr. J.W. Niedermayer (Prairie Prov.) Dr. D.L. Thompson (Alberta)
<u>Constitution & By-laws</u> Dr. W.D. McDougall - 1983 (1)	Annual election to fill expired terms	CDA member with stipulations	3 year	Dr. M.J.R. Leitch (B.C.)
<u>Education</u> Dr. N.J. Layton - 1983 Dr. G.W. Myers - 1983 (2) Dr. R. Hurley - 1983	Annual election to fill expired terms	CDA member with stipulations	3 year 1 year	Dr. N.J. Layton (NDEB) Dr. R. Ellis (UNIVERSITY) Dr. A. Schwartz (UNIVERSITY) Mr. E. Busvek (STUDENT)
<u>Ethics</u> Dr. G.R. Thordarson - 1983 (1) Dr. R.A. Hunt - 1983 (1)	Annual election to fill expired terms	CDA member with stipulations	3 year	Dr. G.R. Thordarson (B.C.) Dr. M.A. Lasko (Manitoba)

NOMINATIONS
CDA ELECTIVE OFFICES - 1983
Election Required*

OFFICE/INCUMBENT	COMMENT	ELIGIBILITY	TERM	NOMINEES -- AFFILIATIONS
<u>Health Care</u> Dr. R.A. Jones - 1983(2) Dr. D.E. MacLeod - 1983(2) Dr. R. Bartalos - 1983 (completed unexp. term of R.J. Sexton)	Annual election to fill expired term	CDA member with stipulations	3 year	Dr. D.G. Sage (Ontario) Dr. G. McFarlane (Nfld.) Dr. R.B. Porter (Nova Scotia)
<u>Hospital Services</u> Dr. M. Gornitsky - 1983(2) Dr. K.M. Gordon - 1983(2) Dr. W.H. Susse1 - 1983(2) Dr. G.L. Terriss - 1983 Dr. E. Cree - 1983	Annual election to fill expired term	CDA member with stipulations	3 year	Dr. W.S. Walter (B.C.) Dr. E. Cree (Quebec) Dr. L. Trudel (Quebec) Dr. E.L. MacInnis (Atlantic Prov.) Dr. C. Foster (Prairie Prov.)
<u>Information Services</u> Dr. D. Scramstad - 1983(2)	Annual election to fill expired term	CDA member with stipulations	3 year	Dr. W.R. Howaniec (B.C.)
<u>Nominations</u> Dr. R.L. Moran - 1983	Nominations will be received from floor at Annual Meeting		3 year	



CANADIAN DENTAL ASSOCIATION / L'ASSOCIATION DENTAIRE CANADIENNE
 1815 ALTA VISTA DRIVE, OTTAWA, ONTARIO, CANADA K1G 3Y6
 TELEPHONE (613) 523-1770

M E M O R A N D U M

TO: Members of the Board of Governors
 Presidents & Secretaries of Corporate Members
 CDA Council Chairmen
 Presidents & Secretaries of Specialty Sections
 Association of Canadian Faculties of Dentistry
 National Dental Examining Board of Canada
 Royal College of Dentists of Canada
 Provincial Registrars

FROM: Dr. D.E. Williams,
 Chairman, Nominations Council,
 Canadian Dental Association,
 1815 Alta Vista Drive,
 Ottawa, Ontario.
 K1G 3Y6

DATE: April 8, 1983

SUBJECT: CDA Nominations 1983-84

1. Elections of officers and council personnel for the 1983-84 term will take place during the 1983 Annual Meeting of the Board of Governors in Vancouver, on September 23-24, 1983.
2. Except in the case of nominations to the Council on Nominations itself, nominations from the floor during the Annual Meeting will not be valid unless vacancies are created by withdrawals from the list of nominations as presented by the Council on Nominations. The Board may then make further nominations from the floor.
3. It is the duty of the Council on Nominations (Article XVI, Section 4 (i), (i-v) to:
 - (a) prepare a list of all elective offices to be filled;
 - (b) solicit nominations, excluding those for the Council on Nominations;
 - (c) rule on eligibility;
 - (d) make further nominations as necessary, or as Council sees fit;
 - (e) submit a report to the Annual Meeting.

4. Nominations must be received before JUNE 15, 1983.

5. Those entitled to make nominations are:

Members of the CDA Board of Governors
CDA Council Chairmen
Presidents or Secretaries of Corporate Members
Presidents or Secretaries of Specialty Sections

6. Nominees to the Council on Education will include the recommendations of:

The Association of Canadian Faculties of Dentistry
National Dental Examining Board of Canada
Royal College of Dentists of Canada
Provincial Registrars

7. All nominations must be accompanied by:

- (a) Written consent of the nominee.
- (b) A completed conflict of interest statement by the nominee.

Failure to comply with these two requirements will nullify the nominations.

8. Except for Executive Council (as otherwise indicated), election to Councils is for a term of three years, renewable once. Members of the Councils must be Active, Associate, Affiliate, or Student Members of the Canadian Dental Association. Associate or Affiliate members are not eligible for nomination for election to the Board of Governors or the Executive Council. Student members are not eligible for nomination for election to the Executive Council.

- 3 -

Nominations should be accompanied by a brief biographical sketch of the nominee attached to the nomination form.

PLEASE FORWARD YOUR NOMINATIONS,
WRITTEN CONSENT OF THE NOMINEES'
WILLINGNESS TO STAND FOR OFFICE
AND A BRIEF BIOGRAPHICAL SKETCH
OF EACH NOMINEE TO:

Dr. D.E. Williams,
Chairman,
Council on Nominations,
1815 Alta Vista Drive,
Ottawa, Ontario
K1G 3Y6

DEADLINE: June 15, 1983

NOMINATIONS
1983

I. President-Elect

Term: 1 year

Eligibility: Member of the Board of Governors

1. _____

II. Chairman of the Board

Term: Elected Annually

Eligibility: Active or Honorary Member (may hold no other elective office during his tenure as Chairman)

Incumbent: N.A. Mancini, Hamilton
Eligible for re-election

1. _____

III. Executive Council - 9 members

Term: 2 years: renewable twice

Eligibility: Member of the Board of Governors

Incumbents: D.E. Williams, Past President
W.R. Thompson, President
R.N. Hicks, President-Elect
P.R. Crawford, 1983 (1)
J. Laporte, 1983 (1)
B.W. Holmes, 1984 (1)
T.E. Ramage, 1984 (1)
J. Robertson, 1984 (1)
D.L. Thompson, 1983 (2)

Summary:

The Executive Council shall consist of the President, Immediate Past President, President-Elect and six additional members. The President-Elect and six additional members shall be elected by the Board of Governors from its membership. The province from which a member is licensed at the date of the Annual Meeting shall determine the province from which the candidate has been drawn. The six additional members shall consist of one each from the following regions:

- (a) Province of British Columbia
- (b) Province of Alberta
- (c) Provinces of Saskatchewan - Manitoba
- (d) Province of Ontario
- (e) Province of Quebec
- (f) Provinces of New Brunswick, Nova Scotia,
P.E.I. and Newfoundland.

..continued /2

Nominations - 1983 - continued...

Executive Council Summary:

Dr. D.E. Williams is retiring as Past President.. Drs. P.R. Crawford and J. Laporte are completing their first term and are eligible for re-election. Dr. D.L. Thompson is completing his second term and is eligible for re-election.

If an incumbent in his non-elective year is elected President-Elect, the uncompleted term will be filled by Presidential appointment.

- 3 to be elected
1. _____ Alberta
 2. _____ Saskatchewan &
Manitoba
 3. _____ Quebec

IV. Council on Constitution & By-laws: 4 members

Term: 3 years: renewable once

Incumbents: W.D. McDougall, Victoria, 1983 (1), Chairman
G. Anthony, St. John's, 1984 (2)
B.M. Jackson, Kitchener, 1984 (1)
G.H. Peacock, Saskatoon, 1985 (1)

Summary:

Dr. W.D. McDougall is completing his first term and is eligible for re-election.

- 1 to be elected
1. _____

V. Council on Dental Materials and Devices: 8 persons

Term: Nominated by the Executive Council and
appointed by the Board of Governors annually.

Incumbents: R.Y. Barolet, Ste-Foy
P.C. Desautels, Montreal
J.M. Gourley, Corner Brook
L.N. Johnson, London
D.W. Jones, Halifax
D. Smith, Toronto
P.T. Williams, Winnipeg
R. Roydhouse, Vancouver

Nominations - 1983 - continued...

VI. Council on Education: 12 members

Term: 3 years: renewable once

Incumbents:	K.C. Bentley, Montreal, 1985 (2)	ACFD
	I.C. Bennett, Halifax, 1984 (2)	UNIV
	M.A. Boyd, Vancouver, 1985 (1)	UNIV
	N. Andrews, Halifax, 1985 (2)	NON-UNIV
	G.W. Burgman, Kirkland Lake, 1985 (1)	NON-UNIV
	M. Jahjah, Montreal, 1985 (1)	NON-UNIV
	E.W. McIntyre, Edmonton, 1985 (1)	NON-UNIV
	G.W. Myers, Edmonton, 1983 (2)	UNIV
	G.S. Beagrie, Vancouver, 1984 (1)	RCD(C)
	K.F. Pownall, Toronto, 1985 (1)	REGISTRAR
	N.J. Layton, Truro, 1983	NDEB
	R. Hurley, 1983 (1 year: renewable annually)	STUDENT

Summary:

Dr. G.W. Myers is completing his second term and a nomination is required for a UNIVERSITY representative.

Dr. R. Hurley is completing a one-year term and a nomination is required for a STUDENT representative.

Dr. N.J. Layton is a Presidential appointment, completing the unexpired term of the late Dr. G.A. Freeze (1983), and a nomination is required for an NDEB representative.

3 to be elected	1. _____	UNIV
	2. _____	NDEB
	3. _____	STUDENT

VII. Council on Ethics: 5 members

Term: 3 years: renewable once

Incumbents: G.R. Thordarson, Vancouver, 1983 (1)
R.A. Hunt, Winnipeg, 1983 (1)
W.I. Vogan, Halifax, 1984 (2)
W.G. Legett, Ontario, 1985 (1)
R.C. McClelland, Edmonton, 1985 (1)

Summary:

Drs. G.R. Thordarson and R.A. Hunt are completing their first term and are eligible for re-election.

2 to be elected	1. _____
	2. _____

Nominations - 1983 - continued...

VIII. Council on Health Care: 12 members

Term: 3 years: renewable once

Incumbents: H.W. Horsman, N.B., 1985 (2), Chairman
R. Bartalos, Ontario, 1983
A.D. Crocker, P.E.I., 1985 (2)
E.K. Fukushima, B.C., 1985 (2)
K.I. Hamilton, Sask., 1985 (1)
R.A. Janes, Nfld., 1983 (2)
D.E. MacLeod, N.S., 1983 (2)
C.T. McNichol, Alta., 1985 (2)
L.-Col. P.R. McQueen, CFDS, 1985 (1)
R.C. Rooney, N.B.
K.R. Skinner, Man., 1985 (1)
A. Toeman, Que., 1985 (1)

Summary:

Drs. R.A. Janes and D.E. MacLeod are completing their second term and are not eligible for re-election. Representatives are required from Newfoundland and Nova Scotia.

Dr. R.C. Rooney is filling the vacancy of the chairman for 1982-83.

Dr. R. Bartalos has completed the unexpired term of R.J. Sexton and is eligible for election.

The Council on Health Care shall consist of one voting member from each corporate member, and a chairman.

3 to be elected	1. _____ Ontario
	2. _____ Nova Scotia
	3. _____ Newfoundland

IX. Council on Hospital Services: 6 members

Term: 3 years: renewable once

Incumbents: M. Gornitsky, Montreal, 1983 (2), Chairman
K.M. Gordon, Edmonton, 1983 (2)
J. Gryfe, Weston, 1984 (1)
W.H. Sussel, Chilliwack, 1983 (2)
G.L. Terriss, Halifax, 1983
E. Cree, Montreal

Summary:

The Council on Hospital Services shall consist of five members representative of the Atlantic Provinces, Quebec, Ontario, the Prairie Provinces and British Columbia.

...continued

Council on Hospital Services - continued

Summary:

Drs. M. Gornitsky, K.M. Gordon and W.H. Sussel are completing their second term and are not eligible for re-election. Dr. G.L. Terriss is completing the unexpired term of Dr. A.E. Hoffman and Dr. E. Cree is filling the vacancy of the Chairman for 1982-83.

- | | |
|-----------------|-------------------------|
| 4 to be elected | 1. _____ B.C. |
| | 2. _____ Prairie Prov. |
| | 3. _____ Quebec |
| | 4. _____ Atlantic Prov. |

X. Council on Information Services: 5 members

Term: 3 years: renewable once

Incumbents: Y. Kamachi, Ontario, 1984 (1), Chairman
M. Carvonis, Quebec, 1984 (1)
T. Koltek, Prairie Provinces, 1984 (1)
C. Leblanc, Atlantic Provinces, 1984 (1)
D. Scramstad, British Columbia, 1983 (2)

Summary:

The Council on Information Services shall consist of five members representative of the Atlantic Provinces, Quebec, Ontario, the Prairie Provinces and British Columbia.

Dr. D. Scramstad is completing his second term and is not eligible for re-election. A representative from British Columbia is required.

- | | |
|-----------------|---------------|
| 1 to be elected | 1. _____ B.C. |
|-----------------|---------------|

XI. Council on Insurance and Investment

The Canadian Dental Association has delegated to the Canadian Dental Services Plans Inc. the function of the Council on Insurance and Investment as a result of an agreement between the two organizations. This agreement is to be reviewed annually by the Board of Governors of the Canadian Dental Association and the Canadian Dental Services Plans Inc.

None to be elected.

XII Council on Nominations: 3 members plus Past-President as Chairman

Term: 3 years

Incumbents: D.E. Williams, N.B., Chairman
G.E. Utas, Alberta, 1985
R.L. Moran, Ontario, 1983
F. Reid, British Columbia, 1984

Summary:

The Council on Nominations shall consist of three members elected by the Board at its annual meeting, pursuant to Article X, Section 5 of the By-laws, together with the Past President, who shall be Chairman. The membership should be geographically representative of the Association and shall include one or more Past Presidents.

Dr. R.L. Moran is completing his term and nominations will be received from the floor at the Annual Meeting to fill one vacancy.

NOMINATION FORM - CDA

One form must be completed for each candidate. Candidates must be eligible to assume office if elected (see conflict of interest by-law on reverse of this form, and specific regional or other stipulations for nominations on the attached memorandum).

PLEASE CHECK OR COMPLETE ONE OF THE FOLLOWING:

Nomination for: Chairman of the Board ___ President-Elect ___
Executive Council ___
Council on _____

***NOTE:** Associate or Affiliated members are not eligible for nomination to the Board of Governors or Executive Council.
Student members are not eligible for nominations to the Executive Council.

PLEASE PRINT OR TYPE THE FOLLOWING:

Candidate's Name _____

Candidate's Address _____ Postal Code _____

It is desirable for a nominee to attach a brief biographical sketch if possible.

IN ACCORDANCE WITH THE STIPULATIONS OF THE CONSTITUTION AS TO REGIONAL OR OTHER REPRESENTATION, AND, AS TO MY ENTITLEMENT TO MAKE NOMINATIONS, I PROPOSE THE ABOVE CANDIDATE FOR NOMINATION.

PLEASE PRINT OR TYPE THE FOLLOWING:

Nominator _____ Office/Position _____

Signature _____

****NOTE:** Please notify the candidate's provincial association identifying the candidate and the office, council or committee to which he/she has been nominated.

ARTICLE XXI SECTION I OF THE CONSTITUTION APPEARS ON THE REVERSE OF THIS NOMINATION FORM. THIS ARTICLE DEALS WITH POSSIBLE POTENTIAL CONFLICTS OF INTEREST.

NOMINEE WILL PLEASE INITIAL ONE OF THE FOLLOWING:

- A) I have no known possible potential conflict of interest _____
B) I have a possible conflict of interest _____
If B) please explain potential conflict on the reverse of this form.

I agree to permit my nomination and qualify by Active _____ Affiliate _____

Associate _____ Student _____ Membership in the CDA

Membership in _____ (Corporate Member)

NAME OF ORGANIZATION RECOMMENDING THIS NOMINATION _____

SIGNATURE OF NOMINEE _____

NOMINATIONS

ACCORDING TO ARTICLE XXI SECTION I OF THE CONSTITUTION, THE FOLLOWING APPLIES:

- (d) All nominees for election or appointment to Councils, Committees or Bureaux of the Association shall declare on the nomination form, all possible potential conflicts of interest. These shall be made known to the Board prior to the election.
- (e) No otherwise qualified member of the Board of Governors shall be nominated or eligible for election to the Executive Council or shall continue to be a member of the Executive Council if he becomes interested or involved directly or indirectly in any business or undertaking which provides dental supplies or services of any kind to the dental profession.
- (f) That, of itself, being a Trustee of the CDA administered insurance and investment plans and/or of itself being a representative of the CDA to the Board of Canadian Dental Service Plans Incorporated shall not constitute a potential conflict of interest for a current member or a candidate for election to the Executive Council of the CDA.
- (g) That, no otherwise qualified member of Councils or Bureaux of the Association shall continue to be a member if he becomes interested in or involved directly or indirectly, in any business or undertaking which provides dental supplies or services of any kind to the dental profession.
- (h) The Board shall be the final authority on any disputed conflict of interest.

PLEASE INDICATE BELOW ANY POSSIBLE POTENTIAL CONFLICTS OF INTEREST:

Return this completed form by June 15, 1983 to:

Dr. D.E. Williams, Chairman,
Council on Nominations,
Canadian Dental Association,
1815 Alta Vista Drive,
Ottawa, Ontario
K1G 3Y6

CURRICULUM VITAE

Name MANCINI, N.A.
 Address 280 Barton Street East,
Hamilton, Ontario Postal Code L8L 2X3
 Office Telephone No. 529-0041 Area Code 416

Personal: Married - Josephine, Oct. 10, 1949
 3 sons - Michael Gerard, Nicholas Anthony Jr., John Patrick

Education:
 Elementary - St. Ann's School, Hamilton
 Secondary - Cathedral High School, Hamilton
 B.A. (Chem., Physics, Biology) University of Toronto
 D.D.A. - University of Buffalo

Memberships:

- Served on original Foundation Committee for the Hamilton Theatre Auditorium Centre
- Served on Hamilton Urban Renewal Committee
- Served on Staff of Hamilton Civic Hospitals
 Served (6 yrs.) Board of Governors of Hamilton Civic Hospitals
- Served for one year - Board of Directors on Social Planning and Research Council
- Past Chairman of Canadian Catholic School Trustees Assoc. (C.C.S.T.A.)
- Past Chairman of Ontario Separate School Trustees Assoc. (O.S.S.T.A.)
 Presently on Executive Council of O.S.S.T.A.
- Past Chairman of Ontario School Trustees Council (O.S.T.C.)
 which includes 5 Trustees' Associations of Ontario
 Presently - on Board of Directors of O.S.T.C.
- Dominion Council of Health - (3 yrs.)
- Past Chairman of Hamilton-Wentworth Roman Catholic Separate School Bd.
- Presently School Trustee and Chairman of Education Committee
- Accorded Papal Honour (made a K.S.6)(Knighthood) Knight of St. Gregory
- Past President of Hamilton Academy of Dentistry
- Member - Canadian Academy of Prosthodontists
- Serving as Chairman of Board - O.D.A.
- Serving as Chairman of Board - C.D.A.
- Past Grand Knight - Knights of Columbus, Hamilton

PRESIDENT-ELECT

CURRICULUM VITAE

Name CRAWFORD, P. Ralph

Address 1201 - 233 Kennedy Street,

Winnipeg, Manitoba Postal Code R3C 3J5

Office Telephone No. 943-4455 Area Code 204

Personal: Born, Winnipeg, Manitoba, 1928
 Married - Olga, 1952
 Children - Son: Patrick, MSc Entomology
 Daughter: Aileen, Grade XII

Early Education:
 High School: Winnipeg, Grade XII

Early Employment:
 - Theatre Manager: Famous Players Canadian Corp.;
 Winnipeg, Brandon, Regina, Moose Jaw; 1947 - 1956
 - Lay Minister: United Church of Canada; southern
 Saskatchewan 1954 - 1960

Pre-Professional
 - College of Notre Dame, Wilcox, Saskatchewan
 - University of Saskatchewan
 - University of Ottawa, B.A. 1959

Professional:
 - D.M.D. (Honors), University of Manitoba 1964
 - General Practice : Winnipeg 1964 - present
 (limited to removable prosthodontics since (1978)
 - Part-time lecturer and clinical demonstrator:
 University of Manitoba, Faculty of Dentistry 1964 - present
 in removable prosthodontics and recently co-
 ordinator of the Geriatric Dental Program.

Memberships, Fellowships, and Awards:
 - Winnipeg Dental Society - President 1972
 - Manitoba Dental Association
 - Board Member 1972 - 1978
 - President, 1976
 - Chairman, Mediation Committee 1972 - 1975
 - Chairman, Ethics Committee 1974 - 1978
 - Chairman, Public Relations 1975 - 1978
 - Chairman, Denture Clinic Committee 1975 - 1979
 - Chairman, CDA National Convention 1978
 - Chairman, MDA Legislation Committee 1978 - present
 - Manitoba representative NDEB Board of Directors 1978 - 1980
 - Representative CDA Board of Governors 1979 - present
 - Awarded M.D.A. Presidents Award of Merit
 ("Dentist of the Year") 1975 & 1978

- 2 -

- N.D.E.B. Examiner, Prothodontics, 1976 - present
- CDA Executive Council 1981 - present
- Fellow International College of Dentists
- Omicron Kappa Upsilon, member
- Xi Psi Phi Fraternity, member (Charter Beta Iota)
- Canadian Association of Prosthodontics,
Executive member
- American Academy of Implant Dentistry,
Associate member
- Alumni Association, University of Manitoba
 - Board of Directors 1978 - present
 - President 1982 - 1983
- Winnipeg Rotary Club, member

EXECUTIVE COUNCIL

CURRICULUM VITAE

Name Jean Laporte
Address 814 Holland
Québec, P.Q. Postal Code G1S 3S2
Office Telephone No. 527 8443 Area Code 418

Date de naissance: 1 août 1936

Marié à : Pierrette Miller
3 enfants: Nathalie, Brigitte, Eric

B.A. : 1959 collège Ste. Marie, Montréal

D.D.S. : Université de Montréal 1964

Capitaine corps dentaire: 1964 - 1969

Pratique privée : Québec 1969 - à aujourd'hui

Président fondateur société d'analgésie dentaire de l'est du Québec: 1974

Président société dentaire de Québec: 1975

Vice Président: A.C.D.Q. : 1976

Exécutif : A.C.D.Q. : 1974 - 1977

Conseil administration: CDA 1979-1980-1981 - 1982-1983

Exécutif CDA: 1980-1981-1982-1983

EXECUTIVE COUNCIL

CURRICULUM VITAE

Name Jack W. Niedermayer, D.D.S.,

Address 710 - 1805 Rose Street,

Regina, Saskatchewan Postal Code S4P 1Z8

Office Telephone No. 522-6790 Area Code 306

PLACE OF BIRTH: Regina, Saskatchewan

EDUCATION

- B.A., 1960 University of Saskatchewan
- D.D.S. 1964, University of Alberta.

DENTAL ACTIVITIES

- Private Practice: Regina, Saskatchewan 1964 to present
- Past President - Regina and District Dental Society
- Past President - College of Dental Surgeons of Saskatchewan
- Present member of Board of Governors of the Canadian Dental Association representing Saskatchewan
- Member of Canadian Dental Association Committee on Salaried Dentists.

EXECUTIVE COUNCIL

CURRICULUM VITAE

Name THOMPSON, Donald Lloyd
Address 68 Clarendon Rd. N.W.
Calgary, Alberta Postal Code T2L 0P3
Office Telephone No. 289-3746 Area Code 403

Personal: Born, Moose Jaw, Sask., December 13, 1921
Married: Mary Johnston (daughter of a dentist) June 9, 1945
Children: 4 - Son, John - Dentist in Calgary
Daughters - Donna, Pat, Pam
(one entering fourth year dentistry, Univ. of
Calgary, one married to a periodontist, one a
physical education teacher)

Education:
Early education in Moose Jaw, Sask.
Graduated - Faculty of Dentistry, University of Toronto - 1960

Practice:
Medical Arts Building, Calgary 1950 - 1973
1133 - 17 Avenue N.W., Calgary 1973 - present

Dental Association Membership:
- Calgary Dental Society
- Mediation Committee and various other committees
- President
- Alberta Dental Association 1978
- Convention Chairman and other Council Chairman
- President
- Various A.D.A. and C.D.A. Committees
- Presently Alberta's senior CDA Governor
- Member of Executive Council of CDA
- Served as liaison on Councils of Hospital Services,
Education, Ethics and Dental Materials
- Member of the International College of Dentists

Other:
- Served in the Navy 1942 - 1946
- Served R.C.D.C. militia becoming Commanding Officer 1950 - 1961
of 59th Dental Unit, Calgary.
- Member of the Elks, R.A.U.S.I. and Calgary Winter Clubs
- Chairman of Alberta Southern and provincial playdowns
for mixed curling for six years.
- Honorary life member of the Southern Alberta Curling
Association

Interests:
Golf
Curling
Skiing
Painting

CONSTITUTION & BY-LAWS

CURRICULUM VITAE

Name LEITCH, M.J.R. (Mac)
Address 22 - 1710 Ellis Street,
Kelowna, B.C. Postal Code V1Y 2B5
Office Telephone No. 762-2440 Area Code 604

Personal:

Born - Melfort, Sask.
Married - Joan
3 children - Malcolm, Ian, Melanie

Education:

B.A. University of Sask. 1950
B.D.S. McGill University 1955

Practice:

Private practice in Kelowna, B.C. 1955

Dental Positions:

- Pres. & Sec. of Kelowna & District Dental Society
- Pres. & Sec. for Thompson Okanagan Dental Society
- Elected representative to College of Dental Surgeons of 1977
British Columbia
- Elected to College of Dental Surgeons of British 1978
Columbia Executive Council
- Elected Vice President of College of Dental Surgeons of 1980
British Columbia
- President of College of Dental Surgeons of British 1981
Columbia

Associations:

- Past President of Central Okanagan District Boy Scouts Assoc.
- Member of Board of Governors of Shawnigan Lake School for Boys
- Active in the United Church
- Past President of Kelowna Rotary
- Paul Harris Fellow in Rotary

Interests:

Alpine skiing, golf and gardening.

CURRICULUM VITAE

COUNCIL ON EDUCATION

Name BUSVEK, Edward
Address 65 Eaton Avenue
Toronto, Ontario Postal Code M4J 2Z4
Office Telephone No. 463-4887 Area Code 416

Education:

B.Sc. - University of Western Ontario, London, - 1980
D.D.S.- (candidate) University of Toronto - 1984

COUNCIL ON EDUCATION

CURRICULUM VITAE

Name Roger L. Ellis
 Address 1043 Dent/Pharm. Ctr. University of Alberta
Edmonton, Alberta Postal Code T6G 2N8
 Office Telephone No. 432-3631 Area Code 403

EDUCATION

D.D.S.	U of T	1956	(Honors)
D.D.P.H.	U of T	1968	(Mittton and Fraser Medals)
M.Sc. (Health Admin)	U of T	1970	(Thesis - Dental Prepayment)
Fellowship	R.C.D.(C)	1976	(Dental Public Health)

CAREER

Private practice in Dentistry, 1956-1966, Preston, Ontario
 One year spent travelling in Europe, 1967-1968
 Full time post-graduate student, 1967-1968
 Research Associate, Dept. of Dental Public Health
 Faculty of Dentistry, 1968-1969
 Assistant Professor, Dept. of Community Dentistry
 Faculty of Dentistry, University of Toronto, 1969-74
 Associate Professor, Dept. of Community Dentistry
 Faculty of Dentistry, University of Toronto, 1974-79
 Professor and Chairman, Dept. of Dental Health Care
 Faculty of Dentistry, University of Alberta, 1979 -

RESEARCH GRANTS 6

PUBLICATIONS 13

MEMBERSHIPS

- i) Canadian Dental Association
- ii) Alberta Dental Association
- iii) Ontario Dental Association
- iv) Canadian Society of Public Health Dentists
- v) Ontario Society of Public Health Dentists
- vi) Canadian Public Health Association
- vii) Ontario Public Health Association
- viii) American Public Health Association
- ix) Pierre Fauchard Academy
- x) Organization of Teachers of Dental Practice Administration
- xi) American Association of Dental Schools

COUNCIL ON EDUCATION

CURRICULUM VITAE

Name LAYTON, Norman J.

Address 10 Duke Street, P.O. Box 425,

Truro, Nova Scotia Postal Code B2N 5C5

Office Telephone No. 895-4937 Area Code 902

Practice:

General Practice, Truro, N.S.

Association Membership:

- Past President of the National Dental Examining Board
- Past President of the Nova Scotia Dental Association
- Member of Council on Education of CDA
- Member of Provincial Dental Board of Nova Scotia

COUNCIL ON EDUCATION

CURRICULUM VITAE

Name SCHWARTZ, Arthur

Address University of Manitoba, Faculty of Dentistry, Room D-113

780 Bannatyne Ave. Winnipeg, Man. Postal Code R3E 0W3

Office Telephone No. 786-3631 Area Code 204

Personal:

- Wife - Daphne
- Five children

Education:

- | | |
|-------------------------------------|------|
| Pre Dental - University of Manitoba | |
| Dentistry - University of Toronto | 1945 |

Employment:

- | | |
|---|----------------|
| - Royal Canadian Dental Corps | 1944 - 1947 |
| - Private Practice, Kenora, Ontario and
Winnipeg, Manitoba | |
| - Director, Dental Services, Province of Manitoba | 1955 - 1958 |
| - Medical Services Branch, Health and Welfare Canada | 1971 - 1978 |
| - Dean, Faculty of Dentistry, Univ. of Manitoba | 1978 - present |

CURRICULUM VITAE

COUNCIL ON ETHICS

Name Dr. Michael Anthony Lasko
Address 12 Seabrook Cove
Winnipeg, Manitoba Postal Code R2J 3G2
Office Telephone No. 589-3190 Area Code 204

MICHAEL ANTHONY LASKO, D.M.D.,

Place/Date of Birth: Toronto, Ontario 1944
Marital Status: Married (Judy) 1967
Children: Son David - Grade IX
Daughter Cathy - Grade VII
Early Education: Gordon Bell High School 1961 Grade XII
Pre-Professional: University of Manitoba 1962 - 1963
Faculty of Science
Professional: University of Manitoba 1967 D.M.D.
General Practise ... Winnipeg 1967 - Present
Part Time Clinical Demonstrator, University
of Manitoba Faculty of Dentistry in Restora-
tive Dentistry 1979 - 1981
Memberships: Winnipeg Dental Society
Manitoba Dental Association
Mediation - Peer Review Committee - 1977 - 1980
Social Allowance Review Committee - 1980 - 1983
Registrar Manitoba Dental Association 1983
Xi Psi Phi Fraternity
Alumni Association, University of Manitoba

COUNCIL ON ETHICS

CURRICULUM VITAE

Name Gordon Roy Thordarson
Address 1125 West 8th Avenue,
Vancouver, B.C. Postal Code V6H 3N4
Office Telephone No. 736-3621 Area Code 604

Personal: Born - Selkirk, Manitoba
Married - 2 children

Education: University of British Columbia 1955 - 1958
University of Manitoba, Faculty of Dentistry 1958 - 1962
Received the degree D.M.D.
University of Washington, Graduate Periodontics 1965 - 1967
Certificate in Periodontics

Practice: Private Practice 1962 - 1965
Private Practice as a Periodontist 1967 - 1976
Taught at the University of Washington 1967 - 1970
Taught at the University of British Columbia 1970 - 1972
& 1976 - 1982

Association Membership:

Member -
Canadian Dental Association
College of Dental Surgeons of British Columbia
Interspecialty Dental Society of British Columbia
Canadian Academy of Periodontology

Held a number of positions in organized dentistry
Dental Society as well as many committees

COUNCIL ON HEALTH CARE

CURRICULUM VITAE

Name McFARLANE, G.J.
Address P.O. Box 498,
Grand Falls, Nfld. Postal Code A2A 2J9
Office Telephone No. 489-2186 Area Code 709

Personal:

Born - Nov. 1, 1940, St. John's, Nfld.

Education:

B.Sc. - St. Dunstan's Univ., P.E.I. - 1962
D.D.S. - Dalhousie Univ., Halifax, N.S. - 1966

Practice:

General Dentistry - Grand Falls, Nfld. - 1968 to present
Chief of Service - Dentistry - Central - 1974 - 1982
Nfld. Hosp. (local Hosp.)

Associations:

President, Nfld. Dental Assoc. - 1979 - 1981
Member of various committees with the
Nfld. Dental Assoc. during the past years.

COUNCIL ON HEALTH CARE

CURRICULUM VITAE

Name PORTER, Roger B.
Address 222 Main Street,
Antigonish, Nova Scotia Postal Code B2G 2C2
Office Telephone No. 863-1222 Area Code 902

Education:

B.A. (ED),	Memorial University	1966
B.Sc.	Memorial University	1967
D.D.S.	Dalhousie University	1971

Association Membership:

- President, Amalgamator Society	1968
- Antigonish Lions Club	1977
- Member Board of Appeal Department of Social Services Province of Nova Scotia	1980 -
- Member Dental Care Systems Committee NSDA	1979
- Chairman Economic Review Committee NSDA	1980 - 1982
- President Antigonish Camp Gideons International	

COUNCIL ON HEALTH CARE

CURRICULUM VITAE

Name SAGE, David G.
Address 379 Hunter Street,
Woodstock, Ontario Postal Code N4S 4G3
Office Telephone No. 539-9825 Area Code 519

Personal: Born - April 5, 1949, Toronto, Ontario

Education: University of Toronto 1974

Practice:
Thessalon, Ontario 1974 - 1978
Woodstock, Ontario 1978 - present

Association Membership:

- Governor to ODA - Sault Ste. Marie	1976 - 1978
- Member Dental Prepayment Advisory Committee	1978 - present
- Chairman Dental Prepayment Advisory Committee	1981 - 1983
- Governor to ODA - Oxford Dental Society	1982 - 1983
- President Oxford Dental Society	1980 -

COUNCIL ON HOSPITAL SERVICES

CURRICULUM VITAE

Name FOSTER, Colin F.

Address 1406 - 233 Kennedy Street,

Winnipeg, Man. Postal Code R3C 3J5

Office Telephone No. 943-7534 Area Code 204

Personal: Born - York, England, January 25, 1945

Education:

1963 - 1968 Univ. of Andrews, Scotland - B.D.S.
1970 - 1973 Dalhousie University, Halifax, N.S.) Diploma in Oral
Surgery, M.Sc.
1977 Fellowship Royal College of Dentists of Canada

Committees:

M.D.A. - Dental Review Committee - Chairman
- Specialists Committee - Chairman
- Economics Committee - member
C.A.O.M.S. - Hospital Services Committee - Chairman
- Education Committee - member
- Prairie Councillor, CAOMS Executive

Publication:

Tuberculous Osteomyelites of the Mandible, Report of case Sept 1970
Journal of Oral Surgery

Practice: Private Practice in Winnipeg - Practice restricted to Oral &
Maxillofacial Surgery

COUNCIL ON HOSPITAL SERVICES

CURRICULUM VITAE

Name MacINNIS, E.L. (Ed.)

Address 1011 Shaunslieve Drive,

Halifax, N.S. Postal Code B3M 3N3

Office Telephone No. _____ Area Code _____

PERSONAL:

Born - August 4, 1940

SIN - 428-661-078

MARRIED

EDUCATION:

- 1962-1964 - St. Francis Xavier University: Science (PreMed)
- 1964-1968 - D.D.S., University of Toronto
- 1974-1977 - Diploma (Oral & Maxillofacial Surgery) Madigan Army
- 1979 - Diplomate, ABOMS
- 1980 - Fellowship (F.R.C.D.), Royal College of Dentists of Canada

POSITIONS HELD:

- 1968-1972 - General Dental Officer, CFDS, Halifax
- 1972-1974 - General Dental Officer, CFDS, West Germany
- 1972-1973 - PMC Officers Mess, CFB(E), Baden
- 1974-1977 - Oral and Maxillofacial Surgery Resident, Madigan Army Medical Center, Tacoma, Wa.
- 1977-1981 - Chief of Oral and Maxillofacial Surgery, CF Hospital Halifax
- 1980-1981 - Base Dental Officer, CFB Halifax, N.S.
- 1980-1981 - Assistant Professor, Department of Oral Diagnosis & Oral Surgery, Part-time, Dalhousie University
- 1982 - Assistant Professor, Department of Oral Diagnosis & Oral Surgery, Full time, Dalhousie University

HOSPITAL AFFILIATIONS:

- CF Hospital Halifax - Chief of Oral and Maxillofacial Surgery, 1977-1981
 - Treasurer, Medical Staff, 1978-1979
 - Chairman Entertainment Committee, 1977-1979
 - Chairman Infection Control Committee, 1979-1981
 - Consultant, Oral and Maxillofacial Surgery, December, 1982
- Victoria General Hospital
 - Courtesy Staff, 1980-1982
 - Active Staff, 1982
- IWK Hospital for Children
 - Temporary appointment active staff, December 1982

PRIZES AND AWARDS:

- Murphy Sword, Honour Cadet 1964, Armour Corps School, Camp Borden
- Honour Cadet, 2nd Phase DOTP, CFDS School, 1966
- Pedodontic Prize, University of Toronto, 1968
- C.D. (Canadian Forces Decoration) 1974

DENTAL LICENSURE AND CERTIFICATION:

- 1968-1980 - General Dentistry, Ontario
- 1977-1980 - Oral Surgery, Ontario
- 1977-1981 - Oral Surgery, Nova Scotia
- 1979 - Diplomate, American Board of Oral & Maxillofacial Surgery
- 1980 - Fellowship, Royal College of Dentists of Canada

SOCIETIES AND ORGANIZATIONS:

- 1977-1981 - Halifax County Dental Society, Member
- 1977-1981 - Nova Scotia Dental Association, Member
- Canadian Dental Association, Member
- Canadian Association of Oral and Maxillofacial Surgeons, Member
- Royal College of Dentists of Canada, Fellow
- American Board of Oral and Maxillofacial Surgery, Member
- Society of Dental Specialists of Nova Scotia, Member
- 1968-1980 - Ontario Dental Association, Member
- Canadian Craniofacial Society

OTHER PROFESSIONAL ACTIVITIES:

- 1981 - Committee Member of the Drug and Therapeutics Committee of the Health Services and Insurance Commission of N. S.

CURRENT RESEARCH:

1. A Study on the duration of Post Operative Analgesia utilizing Bupivacaine HCl.

PUBLICATIONS:

1. MacInnis, E.L., Horizontal mandibular cuspid impaction and contralateral compound composite odontoma.
CFDS Quarterly 14:7, Jan 1974.
2. McCurdy, J.A., MacInnis, E.L., Hays, L.H., Fatal mediastinitis after a dental infection.
J Oral Surg 35:726, Sept 1977.
3. MacInnis, E.L., Hyperbaric oxygen therapy in oral surgery.
Pending publication CFDS Bulletin

PAPERS PRESENTED:

1. 1969 - Pin retained amalgam table clinic, Atlantic Provinces Dental Convention, Summerside, P.E.I.
2. 1974 - Surgical endodontics, U.S. Army Europe General Dentistry Annual Meeting, Frankfurt, W. Ger.
3. 1976 - Surgical infections of odontogenic origin, Madigan Army Continuing education.
4. 1977 - Infection control in outpatient practice, Fairbanks Alaska Dental Society.
5. 1978 - Parameters of orthognathic surgery, CFDS School, Bordon, Ont.
6. 1979 - Head and neck infections of odontogenic origin, NDMC, Ottawa, Ontario.
7. 1979 - Parameters of intravenous sedation, 12 Dental Unit Annual Conference.
8. 1980 - Current concepts in antibiotic usage, Rhine Valley Dental Society, Lahr, W. Germany.
9. 1980 - Current procedures in orthognathic surgery. Rhine Valley Dental Society, Lahr, W. Germany.
10. 1979 - Maxillofacial trauma in the military environment, C.A.O.M.S. Quebec City.
11. 1981 - Exodontia from the seated position, NDMC Ottawa, Ontario and Rhine Valley Dental Society, Lahr, W. Germany.
12. 1982 - Condyle-eminence or bite plane; Graduate Oral Surgery Seminar, Victoria General Hospital, Halifax.
13. 1983 - Surgical removal of teeth - Head and neck infections of odontogenic origin - Antibiotic therapy, Nfld. Dental Association, Corner Brook.
14. 1983 - Surgical management cervicofacial infections, Review Course Oral and Maxillofacial Surgeons, Dalhousie University, Halifax.

SOCIAL CLUBS:

1. Dive Nova Scotia, Member.
2. Stadacona Squash Club, Member.
3. Scotia Branch Legion, Member.

COUNCIL ON HOSPITAL SERVICES

CURRICULUM VITAE

Name	TRUDEL, Louis		
Address	Résidence: 1590, rue Longchamps,		
	Bureau: 230 ouest, rue King, Suite 302		
	Sherbrooke		J1J 1J1
	Sherbrooke	Postal Code	J1H 1P9
Office Telephone No.	563-9983		819
	569-9164	Area Code	819

- Date de naissance - 1^{er} novembre 1939, Noranda, Québec
- Etat civil - Marié à Odette Delisle, le 31 juillet 1965
- Enfants: Eric, Christian, Geneviève

Formation Scolaire

- Séminaire St-Charles Borromée B.A. 1959
- Cours collégial - Université de Sherbrooke BScII 1960
 - Université Western, Ont. 1962
- Cours universitaire-
 - Faculté de Médecine Dentaire Université de Montréal D.D.S. 1967
- Internat en Chirurgie Buccale -
 - Kings County Hospital Center 1969
(New York Univ. Downstate)
Brooklyn, New York
- Résidence en Chirurgie Buccale -
 - Kings County Hospital Center 1970
- Chirurgie Buccale -
 - Boston University - Certificat 1968
Chirurgie Buccale

Qualifications

- Licence D.D.S. (Québec) 1967
- Certificat en Chirurgie Buccale 1970
- Certificat de qualification 1967
(Bureau National d'Examen dentaire du Canada)
- Clinicien - Université de Montréal 1970 - 1973
- Professeur - Université de Sherbrooke 1975 -
Faculté de Médecine, Cours de
Médecine dentaire en 2^{ième} année
- Université de Montréal 1980 - 1982

Pratique Privée

- Association avec le Docteur Pierre Surprenant 1970
- Association avec les Docteurs Pierre Surprenant 1973
et Claude Rancourt
- Association avec le Docteur Claude Rancourt 1982

Participation aux Associations Professionnelles

- Membre de l'Association Dentaire Canadienne
- Membre de l'Association Internationale des Chirurgiens Buccaux
- Membre de l'Association des Spécialistes en Chirurgie Buccale et Maxillo-Faciale du Québec
- Membre de l'Association Canadienne des Spécialistes en Chirurgie Buccale et Maxillo-Faciale

Participation aux Associations Sociales

- Membre du Club Social de Sherbrooke 1970 - 1983
- Confrérie "Vignerons St-Vincent"
- Canadian Power Squadron

Privileges

- Membre actif et Directeur du Service Dentaire
Centre Hospitalier Hôtel-Dieu, Sherbrooke
- Membre consultant, Hôpital d'Youville, Sherbrooke
- Membre consultant, Centre Hospitalier Universitaire,
Sherbrooke
- Membre consultant, Centre Hospitalier St-Vincent de
Paul, Sherbrooke
- Membre consultant, Centre Hospitalier de Sherbrooke
- Membre consultant, Hôpital Ste-Croix, Drummondville

Fonctions Académiques et Administratives

- Chargé de cours en Médecine Dentaire,
Faculté de Médecine, Université e Sherbrooke 1975 -
- Clinicien - Faculté de Médecine Dentaire,
Université de Montréal 1979
- Conseiller - Association Canadienne des
Spécialistes en Chirurgie 1972
Buccale et Maxillo-faciale 1983 - 1984
- Trésorier - Association des Spécialistes en
Chirurgie Buccale et Maxillo-Faciale du Québec 1976 - 1979
- Vice-Président - Association des Spécialistes
en Chirurgie Buccale et Maxillo-Faciale due Que 1979 - 1982
- Président - Association des Spécialistes en
Chirurgie Buccale et Maxillo-Faciale du Québec 1982 -
- Président du Comité d'Admission - Association
Canadienne des Spécialistes en Chirurgie
Buccale et Maxillo-Faciale 1979 - 1985

Sports

- Ski
- Natation
- Voile

COUNCIL ON INFORMATION SERVICES

CURRICULUM VITAE

Name HOWANIEC, W.R.

Address #202 - 5481 Kingsway

Burnaby, B.C. Postal Code V5H 2G1

Office Telephone No. 438-8238 Area Code

Personal: Born - May 3, 1941
Married - two children, boy 14 yrs., girl 12 yrs.

Education: Dental degree University of Alberta

Memberships:

Seymour Golf Club
Burnaby Racquet Club
Associated Wildlife Preserves
Vancouver & District Dental Society
Served as a director of Associated Wildlife Preserves, and
President of Gyro Service Club

Served on the Public Relations Committee for the College
of Dental Surgeons, and managed the College Dental Clinics
throughout B.C.

Interests: Salmon fishing and racquetball

STUDENT AFFAIRS

REPORT OF THE COUNCIL ON STUDENT AFFAIRS TO THE SEPTEMBER 1983 CDA BOARD OF GOVERNORS

Council members: Dr. Alain Thivierge, Chairman - Université de Montréal
Mr. Robert Scott, University of British Columbia
Mr. Rick Chilibeck, University of Alberta
Mr. Tim Barker, University of Saskatchewan
Dr. Dave McLeod, Student Governor, University of Saskatchewan
Mr. Peter Kowal, University of Manitoba
Mr. Ed Busvek, University of Toronto
Miss Jane Metler, University of Western Ontario
Mr. Andrew Hasegawa, McGill University
Mr. André Ruest, Université de Montréal
Miss Julie Boudreau, Université Laval
Mr. Don Trider, Dalhousie University
Dr. Rita Hurley, Montreal, Quebec
Dr. Peter Judd, Toronto, Ontario
Dr. B.W. Holmes, Executive Council Liaison, Kenora, Ontario

1. Council Meetings

The Council has met once since the last Board meeting, on March 7-8, 1983 in Ottawa.

A. Matters Requiring Board Action

1. Increase in Student Membership Fee

Council notes that effective in 1984, CDA will increase its membership fee. In keeping with this action and on the premise that CDA fees should be increased gradually in small amounts rather than in one large amount, the following motion was passed:

RESOLVED:

83.69 *THAT the CDA student membership fee be set at 6% of the CDA active fee, the amount to be rounded off to the nearest dollar.*

ADOPTED

A. Matters Requiring Board Action (Cont'd.)2. CSA Representative to the American Student Dental Association

In keeping with past procedures and Council's ongoing liaison with the American Student Dental Association, Council passed the following motion:

RESOLVED:

- 83.70 *THAT CSA continue to send a student representative to the annual American Dental Association meeting in 1983.*

ADOPTED

B. Information Not Requiring Board Action1. Student Questionnaire

Ed Busvek reviewed with Council, the statistics he compiled from information received from seven of the ten dental schools. He will continue to work on this project and submit it prior to Council's next meeting.

2. Council Guidelines and Procedures

Council reviewed a draft set of guidelines and procedures as developed by Tim Barker and the Chairman.

These guidelines will be reviewed by Council members for Council's next meeting.

3. Membership Figures

Council reviewed the membership figures for 1982-83 and noted that 91.7% of all dental students belonged to the CDA. This was a slight decline from last year. Each representative was provided with a list of first year non-members and encouraged to speak once again to these non-joiners.

Noting Saskatchewan's 100% membership figure, Council discussed the possibility of implementing the method used there, at all schools thereby collecting CDA fees with the DSS fees, at the beginning of each school year.

The above mentioned method for the collection of fees generated a great deal of debate and discussion. Because some Council members wished to discuss this with their DSS societies, any action was tabled until the September 1983 CSA meeting.

8. Information Not Requiring Board Action

3. CDA Resource Book for Dental Faculty Libraries

Council reviewed a proposed CDA resource binder for dental faculty libraries. This binder would contain general interest information for students, such as CDA guidelines and policy statements, condensed information on the recently completed manpower study, information on the CDRF Award, a general overview of the CDA, CDA Letters Patents and Bylaws and Directory of Officials, a definition of CDA membership categories, a list of CDA member services, an overview of the accreditation process and its classifications, graduate and post-graduate information, the Student Representative Manual, IADS information, etc.

This information would be developed by CDA staff and forwarded to dental school libraries shortly.

4. Practice Management Manual

Since CDSC'82, eleven new chapters have been written and the original six chapters have been revised.

A letter has been sent to the teachers of practice administration requesting their input and comments.

Council discussed the format for the finished Manual and the initial distribution of these materials. It is Council's desire to be able to distribute it as a CDA membership benefit to third or fourth year students.

5. Representatives to Additional Meetings

According to Council's internal guidelines, the prerogative for delineating Council representatives to outside meetings rests with the Chairman of Council. It is strongly felt by Council that only those representatives who will still be in office at Council's next meeting should be selected to attend these meetings.

Council presently sends representatives to the following organizations:

- The National Dental Examining Board of Canada
- Canadian Dental Service Plans Inc.
- The Association of Canadian Faculties of Dentistry
- The American Student Dental Association
- The CDA Council on Education

6. Student Articles in CDA Journal

Further to Council's request last fall for greater input in the CDA Journal, a series of guidelines were developed by Clarence Metcalfe, Editor of the CDA Journal.

Council suggested they discuss the prospect of more research articles from students for the CDA Journal, with their student bodies, for further discussion at Council's next meeting.

7. Student Newsletter

Council continued to publish its twice yearly student newsletter, Dento-Forum, this past year. The newsletter appears to be well received by undergraduates and graduates alike.

8. Definition of Student Member

According to CDA's present definition of student member, students who have proceeded directly from an accredited undergraduate program to an internship, residency, graduate or post-graduate program, may apply for student membership.

It was brought to Council's attention by the University of Toronto Graduate Society that students in Ontario cannot proceed directly from an undergraduate program to graduate studies.

Council has requested that each representative investigate this situation within his/her province for further discussion at Council's next meeting.

Council also has informed the CDA Membership Committee of the Ontario concerns.

9. CDSC'83 - September 28 - October 1

Council looks forward to holding its annual students' conference in Vancouver immediately following the CDA Convention.

10. Dental Equipment Insurance

Council members are presently surveying the interest at their faculties in obtaining dental equipment insurance. CDSPI has provided Council with the rates involved, based on a minimum 50% participation level at every dental faculty.

11. CDA Graduate Receptions

For the first time, under the sponsorship of the CDA Membership Committee, Council co-ordinated CDA,s participation in graduate receptions at McGill University and Université Laval.

Conjoint CDA/ODA functions were held at Ontario dental faculties.

Summary

The Council on Student Affairs continues to actively liaise with students at the ten dental faculties and the various sectors of organized dentistry. Through our broad based representation across the country, we feel we can reflect the concerns and interests of Canadian dental students.

Council recognizes the privilege given to it by the Board of Governors of the Canadian Dental Association to represent dental students nationally and extends its appreciation to the Board for its continuing interest and support in student affairs.

Respectfully submitted,

Dr. Alain Thivierge
Chairman

ADOPTION OF REPORT

The Board accepts the Report of the Council on Student Affairs with appreciation.

CANADIAN ACADEMY OF ORAL PATHOLOGY

REPORT OF THE CANADIAN ACADEMY OF ORAL PATHOLOGY

TO THE 1983 ANNUAL BOARD OF GOVERNORS

The 17th Annual Meeting of the Canadian Academy of Oral Pathology was held in Lake Buena Vista, Florida, on May 18, 1983. The meeting was chaired by the President, Dr. A. Elgeneidy of Dalhousie University.

Three new active members were accepted into the Academy. They were Dr. T. Daly (University of Western Ontario), Dr. G. Bradley (University of Toronto), and Dr. R.E. Howell (Dalhousie University). Dr. Elgeneidy explained to the members present that the constitution and by-laws of the CDA had been changed removing mandatory CDA membership as a requirement for membership in the specialty section. In support of the CDA, members of our Academy are encouraged to maintain membership in this national body.

The Nominating Committee presented their slate of officers for the Executive and standing committees and this was unanimously accepted by the members present. Therefore, the Executive for the upcoming year consists of:

President: Dr. G. Wysocki
President-Elect: Dr. D. Mock
Vice-President: Dr. D.G. Gardner
Secretary-Treasurer: Dr. R. Priddy

The members of the standing Committees, including those elected are as follows:

Nominating Committee - Dr. R.W. Priddy, Dr. W. Maxymiw,
Dr. B. Harsanyi
Membership Committee - Dr. R.J. McComb, Dr. B. Blasberg,
Dr. J. Hardie
Professional and Public
Relations Committee - Dr. R. Morancy, Dr. T. McGaw,
Dr. M. Cohen

Dr. B. Wright, the outgoing chairman of the Professional and Public Relations Committee, in his report, made a number of suggestions regarding future directions for our Academy. This included closer ties with the Canadian Association of Pathologists and more active involvement with the C.D.A.. After a lengthy discussion on these topics, Dr. Wysocki, the incoming President, agreed to poll the members of our Academy such that we can consider the suggestions further at our next meeting.

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CANADIAN ACADEMY OF ORAL PATHOLOGY

The time and place for the 18th Annual Meeting of the Canadian Academy of Oral Pathology was discussed and it was agreed that the next meeting will be held in conjunction with the meeting of the American Academy of Oral Pathology in Boston, Massachusetts, in May of 1984. The members present still felt that with the tight economy, it was imperative to combine our annual business meeting with the American Academy meeting, as in the past.

July, 1983

ADOPTION OF REPORT:

The Report of the Canadian Academy of Oral Pathology received as information by the Board of Governors, with thanks.

CANADIAN ACADEMY OF ORAL RADIOLOGY

REPORT OF THE CANADIAN ACADEMY OF ORAL RADIOLOGY TO THE 1983 ANNUAL C.D.A. BOARD OF GOVERNORS

Executive:

President	Dr. F.G. Kellam
President-Elect	Dr. J.A. Reid
Secretary-Treasurer	Dr. C. Price
Education Committee Chairman	Dr. D.W. Stoneman
Membership Committee Chairman	Dr. J.W. Halip
Constitution and Bylaws Committee Chairman	Dr. F.W. Musaph
Historical Documentation Chairman	Dr. H.G. Poyton
Public and Professional Relations Chairman	Dr. D. Forest

The Academy is now in its twelfth year and has a membership of 18 Active and 16 Associate Members. Meetings have been held each year and have varied in length from one to six days, in addition to the Annual General Meeting. The policy of arranging meetings to run concurrently with the Annual C.D.A. Meetings has been encouraged. Unfortunately, either timing or venue have been often inconvenient for Members. This certainly applies to the 1983 C.D.A. Convention in September. Our Academy Members who are involved in teaching programs are unable to attend during that time. Sufficient attendance could not be invoked for a meeting at Vancouver earlier in the summer. The Annual Meeting for this year is now scheduled for Sunday 21 August at Toronto. There are, however, tentative plans to meet concurrently with C.D.A. at Montreal in 1984.

At last year's Meeting, the following papers were presented:-

"Lateral Inflammatory Odontogenic Cyst of the Mandible, Something Old or Something New?"

Dr. D.W. Stoneman

"Antral Mucositis and Mucous Retention Cysts: Results from 2500 Panoramic Films".

Dr. D. Forest

"Dry Wall Construction as a Dental Radiation Barrier" and "Patterns of Radiation in an X-ray Cubicle".

Dr. J.A. Reid

"Panoramic Zonography - Visualization of the Head and Neck of Non-ambulatory Patients."

Dr. F.W. Musaph

"Benign Nerve Sheath Tumours."

Dr. M.J. Pharoah

"T.M.J. Remodelling and Degenerative Joint Disease."

Dr. D.C. Hatcher

CANADIAN ACADEMY OF ORAL RADIOLOGY

"Changes in the Skull and Jaws in Diseases of Deficient Calcification."
Dr. H.G. Poyton

"The Effects of Beam Quality on Image Quality in Dental Radiography."
Dr. C. Price

In addition to these papers, several case presentations were made by members.

During the past two years, work has been undertaken to update the Constitution and Bylaws. Modifications are expected to be adopted at the next Annual General Meeting.

Input has been made, through the C.D.A., with regard to the proposed changes to the Radiation Emitting Devices Act relating to both diagnostic medical and dental radiographic equipment.

Submissions have been made to the Royal College of Dentists of Canada and to the C.D.A. in response to the request for comments on the American Dental Association's Proposed Requirements for Recognition of Specialty Areas.

During the year one of our members, Dr. H.G. Poyton, has been congratulated on the publication of his book "Oral Radiology" and on being elected Honorary Diplomate of the American Board of Oral and Maxillofacial Radiology.

Our Academy, though small, continues to thrive.

Respectfully submitted,



Colin Price
Secretary-Treasurer

ADOPTION OF REPORT:

The Report of the Canadian Academy of Oral Radiology received as information by the Board of Governors, with thanks.

CANADIAN ACADEMY OF PAEDODONTICS

REPORT OF THE CANADIAN ACADEMY OF PAEDODONTICS
TO THE 1983 ANNUAL BOARD OF GOVERNORS

EXECUTIVE: W.J. SIMPSON, EDMONTON, PAST PRESIDENT; I.C. BENNETT, HALIFAX, PRESIDENT; J.A. DERBYSHIRE, CALGARY, PRESIDENT-ELECT, F. PULVER, TORONTO, SECRETARY/TREASURER.

1. THE 1983 ANNUAL MEETING WILL BE HELD IN CALGARY AT THE FOUR SEASONS HOTEL ON SUNDAY, 3 JULY 1983 IN CONJUNCTION WITH THE FIFTH CANADIAN CONGRESS OF DENTISTRY FOR CHILDREN.
2. IT HAS BEEN A LONG STANDING POLICY OF OUR ACADEMY TO MEET WITH THE CDA EVERY OTHER YEAR, AND WE WILL DO SO AGAIN IN MONTREAL BETWEEN APRIL 8 - 12, 1984. DR. DAVID KOZLOFF WILL ACT AS CHAIRMAN.
3. OUR MEMBERSHIP HAS SHOWN STEADY BUT SLOW GROWTH AND WE NOW HAVE 110 ACTIVE MEMBERS PLUS FIVE APPLICANTS.
4. DR. FRANK PULVER AND DR. ARLY DUNGY REPRESENTED OUR ACADEMY AT THE 9TH INTERNATIONAL CONGRESS OF DENTISTRY FOR CHILDREN HELD IN MELBOURNE, AUSTRALIA IN FEBRUARY 1983.
5. DR. FRANK PULVER WILL ACT AS CHAIRMAN OF THE 11TH INTERNATIONAL CONGRESS WHICH WILL BE HELD IN TORONTO, JUNE 1987.

Respectfully submitted,

Frank Pulver, Secretary/Treasurer

ADOPTION OF REPORT:

The Report of the Canadian Academy of Paedodontics received as information by the Board of Governors, with thanks.

THE ASSOCIATION OF PROSTHODONTISTS OF CANADA
L'ASSOCIATION DES PROSTHODONTISTES DU CANADA

REPORT OF THE ASSOCIATION OF PROSTHODONTISTS OF CANADA
TO THE 1983 ANNUAL BOARD OF GOVERNORS

The following is a report from the Association of Prosthodontists of Canada, specialty section representative for Prosthodontics, to the Board of Governors of the Canadian Dental Association for inclusion in material for the 1983 annual meeting of the Board of Governors.

The Association of Prosthodontists of Canada held its annual 1982 scientific session and meeting October 22nd & 23rd at the Meridien Hotel in Montreal. This was a well received and attended meeting. The theme for the presentation material was "The Medically and Surgically Compromised Patient".

Prior to the annual scientific session and meetings, the Association of Prosthodontists of Canada facilitated the second Lorne E. MacLachlan Teaching Conference. This teaching conference reviewed "The Teaching of Maxillofacial Prosthodontics in the Canadian Undergraduate Dental Curriculum".

The Association of Prosthodontists of Canada will hold its annual scientific session and annual meetings September 24th & 25th in Vancouver, B.C. This meeting is being held in conjunction with the CDA and the full cooperation of both organizations hopefully will continue in the future.

The Status Report on Dental Implants has been approved by the Association of Prosthodontists of Canada and will be forwarded to the Journal of the Canadian Dental Association for publication.

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THE ASSOCIATION OF PROSTHODONTISTS OF CANADA

The Executive For the Association for 1983 are as follows:

Past President:	Dr. Douglas Chaytor
President:	Dr. Paul Jean
President Elect:	Dr. Paul Sills
Vice President:	Dr. Jim Anderson
Secretary-Treasurer:	Dr. Brock Love
Councillors:	Dr. Shauket Chaney
	Dr. John Blomfield
	Dr. Bruce Graham
	Dr. Alex Bowman

The Association of Prosthodontists of Canada looks forward to working with the Canadian Dental Association in the future to meet the demands which are facing dentistry in general with particular reference to the discipline of Prosthodontics.

Respectfully submitted,



Dr. W. B. Love
Secretary-Treasurer.

WBL/lw

ADOPTION OF REPORT:

The Report of the Association of Prosthodontists of Canada received as information by the Board of Governors, with thanks.

CANADIAN SOCIETY OF PUBLIC HEALTH DENTISTS

REPORT OF THE CANADIAN SOCIETY OF PUBLIC HEALTH DENTISTS
TO THE 1983 ANNUAL BOARD OF GOVERNORS

The Canadian Society of Public Health Dentists will hold their annual meeting on Sunday, September 25, 1983 9:00 a.m. to 12:00 noon in the Waddington Room, the Hotel Vancouver in Vancouver, British Columbia.

At this meeting Dr. Bo Krasse, Professor and Chairman of the Department of Cariology at the University of Goteborg in Sweden will address the members in attendance on "Prediction and Prevention of Caries - Can Microbiological Methods be Advocated". Currently, Dr. Krasse is a M.R.C. Visiting Professor at the Faculty of Dentistry, University of British Columbia.

A new slate of officers will be proposed at the annual meeting at which time Dr. Bob Romcke of the Department of Health, Prince Edward Island will become President succeeding Dr. Tom Curry of Alberta.

Respectfully submitted

Roger L. Ellis, D.D.S., D.D.P.H.,
M.Sc., F.R.C.D.(C)
Secretary-Treasurer

ADOPTION OF REPORT:

The Report of the Canadian Society of Public Health Dentists received as information by the Board of Governors, with thanks.

THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY
L'ASSOCIATION DES FACULTÉS DENTAIRES DU CANADA

REPORT OF THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY
TO THE 1983 ANNUAL BOARD OF GOVERNORS

We welcome this opportunity to report to the Board of Governors on some of the actions of the Association of Canadian Faculties of Dentistry/ L'Association des facultés dentaires du Canada, during the last few months.

a) Annual Meetings.

The Executive Council, House of Delegates, the Research and Education Committees, as well as The Section of Dental Hygiene Educators, met in Cincinnati, Ohio, in March 1983. In attendance were representatives from the Canadian Dental Association, National Dental Examining Board and the C.D.A. Council on Student Affairs. We are pleased to welcome your President, Dr. W.R. Thompson, who gave a most interesting and informative presentation.

b) Officers.

The House of Delegates elected Dean A. Schwartz as President-elect of A.C.F.D./A.F.D.C. Dean E.R. Ambrose was elected to the Executive Council. Dr. M.A. Boyd was re-elected for a second term and was also re-elected Treasurer.

c) XIII Biennial Conference on Canadian Dental Education and Research.

This Conference will be held at Hecla Island, Manitoba from June 10th to 16th, 1984.

The Research Component will offer ten oral presentations. The featured presentation will be one full day on "Imaging in Dentistry".

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THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY

The Education Component will present "Why Failing Students Pass" for one full day, and one-half day of oral presentations on Teaching Innovations.

There will also be a combined Research-and-Education Poster Session.

There has already been a great deal of interest expressed in this Program.

d) C.D.A. Teaching Conference.

As has been done for several years, A.C.F.D./A.F.D.C. has made recommendations on the topics and Chairmen for the 1983 and 1984 Conferences.

1983 Teaching Conference.

Topic - The Teaching of Practice Management.
Chairman - Dr. Roger L. Ellis.
Site - Vancouver.
Date - September 27, 28, 1983.

1984 Teaching Conference.

Topic - Dental Biomaterials.
Chairman - Dr. Dennis Smith.
Site - C.D.A. Headquarters, Ottawa.

It is understood that the Council on Education has accepted these recommendations.

e) C.D.A. Committee on Salaried Dentists.

The A.C.F.D./A.F.D.C. nominee on this Committee is Dean A. Schwartz and A.C.F.D./A.F.D.C. offers whatever other assistance might be deemed necessary. The decisions of this Committee and the Board are important to the academic staff of our member institutions.

f) Continuing Education.

A.C.F.D./A.F.D.C. continues to support and work closely with the C.D.A. Committee on Continuing Education. The Education Committee of

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THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY

this Association is enthusiastic about continuing education matters and is available for consultation or other input as requested.

g) Research.

The matter of the serious paucity of funding for Canadian Dental Research was given careful consideration. An Ad Hoc Group on Dental Research Funding Strategies, chaired by Dean A.R. Ten Cate will propose recommendations for ameliorating this critical situation, as well as ways and means to improve and develop clinical and basic research in Faculties of Dentistry.

This Group has met several times and has been funded by National Health & Welfare for one of the meetings. The Canadian Dental Association and particular President W.R.Thompson have been of major assistance in our communications with government.

h) Council on Education Liaison.

A.C.F.D./A.F.D.C. has welcomed and been better informed about Council matters since the C.D.A. has provided liaison to our Executive Council and House of Delegates. We are most pleased to have Dr. K.C. Bentley as the new Chairman of The Council on Education and as the Council representative to A.C.F.D./A.F.D.C. Executive Council and House of Delegates. We welcome him and the experience and expertise that he brings.

i) Accreditation Guidelines.

The House of Delegates of A.C.F.D./A.F.D.C. had urged the Board of Governors and the Council on Education to provide a mechanism for input from this Association and the dental schools, if and when any review of the guidelines for accreditation process is undertaken. We are pleased to report that our Education Committee was asked for recommendations and has presented these to the 1983 meeting of The Council on Education.

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THE ASSOCIATION OF CANADIAN FACULTIES OF DENTISTRY

j) Future Directions of A.C.F.D./A.F.D.C.

This Association has solicited and received a number of Position Papers from its delegates. These statements deal with some future directions which A.C.F.D./A.F.D.C. should be pursuing in the view of these authors. The House of Delegates has authorized a survey of all delegates and committee members in an effort to identify matters which should be urgently addressed by the Association.

k) Appreciation.

We would like to express the continuing appreciation of A.C.F.D./A.F.D.C. to the Canadian Dental Association, for the fine spirit of co-operation in the interests of dental education and research, and dentistry in general, which has developed between the two organizations.

I would like to thank President W.R. Thompson for meeting with me in Jasper during the Western Canada Dental Society meeting in June. We had an opportunity to review several issues of interest to both organizations. I would hope that there would be an opportunity for the Executive Councils of the two organizations to meet to review the Future of Dentistry in Canada as it relates to dental research, manpower, dental education, internship or residency programs, practice and public and professional concerns, and other matters that affect our (C.D.A. and A.C.F.D.) future.

I would hope that the presidents of our organizations will have an opportunity to have other meetings like this in the future.

Respectfully submitted,

G.W. Thompson,
President.

June, 1983

ADOPTION OF REPORT:

The Report of The Association of Canadian Faculties of Dentistry received as information by the Board of Governors, with thanks.

THE CANADIAN DENTAL HYGIENISTS' ASSOCIATION
L'ASSOCIATION CANADIENNE DES HYGIENISTES DENTAIRE

REPORT OF THE CANADIAN DENTAL HYGIENISTS' ASSOCIATION
TO THE 1983 ANNUAL BOARD OF GOVERNORS

On this particular occasion, the Canadian Dental Hygienists' Association would like to submit a report for the Canadian Dental Association Annual Board Meeting. Although this has not been done in the past, we feel that there is a need to present a summary of some of the items which have received our attention throughout this year. It may prove helpful to future Executives of both the CDA and the CDHA to have this written summary for further reference.

For the September 1983 Board Meetings, both our organizations will be meeting at the same time. This will prevent an Executive member from attending your meeting such as we have often been able to do in the past. This report will represent the CDHA and answer some of the questions you may have.

Executive Secretary

In the Fall of 1982, the CDHA hired Carol Worobey as Executive Secretary. This marks the first time that a dental hygienist has been employed in this position. Carol is a Past President of the CDHA and her background has proved advantageous in her new role.

We are pleased with the communication that has been established between Carol and the CDA and look forward to continued sharing of information.

Conference on Dental Hygiene Research

On September 30 and October 1, 1982 the first Conference on Dental Hygiene Research to be staged in Canada was held in Winnipeg, Manitoba. The Conference served to bring together recognized research leaders and Canadian dental hygienists already involved or interested in research. The program included panels on Research in Education and Research in Prevention. Research problems in the areas of health promotion, behavioural sciences, the aging population, manpower, economics and dental care delivery were reviewed by the group. Funding for research was also discussed. The Conference laid the groundwork for future involvement by the CDHA in the area of research.

Part-time Brief

A Federal Commission of Inquiry Into Part-time Work was established to study the status of part-time workers. Since dental hygiene is, in a great many cases, a part-time occupation, the CDHA felt it appropriate to make a submission. A written presentation was prepared by our Manpower and Utilization Committee, approved by the Board of Directors and sent to the Chairman of the Commission (Appendix A). A letter of appreciation was received.

Clipping Service

The CDHA thanks the CDA for extending to us you clipping service. Although many of the articles are generated by dental personnel, the ones that reflect on dentistry as it is perceived by the media and public are also interesting.

Educator's Conference

In May 1982 an Educator's Conference was held for those involved with the education of dental hygienists. The participants were so enthusiastic about the communication developed and the benefits to be derived from future meetings that they plan to meet again in Vancouver. The CDHA has been pleased to assist the dental hygiene educators. We thank the CFDE for the major role they played in funding and supporting this important Conference.

R.K. House Study

The Executive has read with interest the initial report submitted by R.K. House and Associates. It is stated in the Foreword to the Study, "We hope that these results will stimulate discussion within the profession and advance the search for solutions to problems where desirable." The CDHA is indeed "stimulated" to discuss and seek solutions to the manpower changes which are taking place. The Study notes that these changes are occurring more rapidly for dental hygiene than they are for dentistry.

An assessment of survey data pertinent to dental hygiene is being made to determine present and future needs for the surveying of dental hygienists. The existence of the R.K. House Study, with its potential for repetition in the future, will be considered in our assessment. Where appropriate, a co-ordinated effort by the CDA and the CDHA in terms of the collection of manpower data could ensure that our organizations are not duplicating surveys. We look forward to further dialogue with the CDA in this regard.

Portability

For the past several years, portability of dental hygienists has been a high priority item within the CDHA. With manpower predictions showing an oversupply of dental hygienists developing in certain parts of the country while underserved areas still remain, it is becoming increasingly important that dental hygienists have the freedom to meet the supply and demand across Canada.

At the moment, accreditation of dental hygiene programs plays a major role in determining a candidate's acceptability to apply for licensure in another province. With some dental hygiene programs not having accreditation status, we see hundreds of dental hygiene graduates severely limited in the number of provinces where they may practice dental hygiene.

We thank the CDA for the efforts they have made in trying to resolve the situation. In Ontario, the final decision seems to be out of the hands of either of our organizations right now. With this in mind, the CDHA Board will be holding a special session in Vancouver to establish clearly the nature of and mechanism for portability desired by this Association.

Definitions

In May 1982, the CDHA set out to define certain terms relating to the employment and supervision of dental hygienists. The task proved more complex than originally anticipated. These definitions are presently in draft form.

Dialogue within our association and with other organizations such as the CDA has indicated vast differences in the interpretation of terms relating to employment and supervision. The determination of precise definitions will enable us to state our policies clearly and accurately and will enable others to interpret them. It is to be emphasized that we are dealing with definitions only. These definitions do not reflect our feelings towards the appropriateness of what is being defined.

When our Executive officers met in Halifax at a special meeting early in 1982 and again at a meeting with the Management Committee in Toronto in May 1982, we suggested that both Associations work together on these definitions. We still encourage CDA's participation in the drafting of these definitions because agreement on the wording of a single set of definitions for use by the CDA and CDHA would simplify matters considerably.

Canadian Fund for Dental Education

In April 1983 the CDHA submitted a request to the CFDE Board of Trustees that they consider appointing a dental hygienist as a member of their Board. The CDHA has long appreciated the fine work being carried out by CFDE and sincerely feels that a dental hygienist could make a meaningful contribution to this group as it serves the dental health field.

We are disappointed to hear that our request has been denied.

It is hoped that some workable arrangement can be made between the CDHA and the CFDE to maximize the potential of these two groups working together.

Licensure, Portability and Placement Service Pamphlet

The CDHA has updated and reprinted our pamphlet providing information on licensure, portability and placement services in Canada. A copy is enclosed for your information and extra copies can be obtained through our Executive Secretary. (Appendix B)

Convention '84

We are pleased to announce that the Canadian Dental Hygienists' Association will be holding our annual convention in Montreal at the same time as the CDA. The Convention will be jointly hosted by the CDHA and the Quebec DHA.

A Convention Committee has been struck in Montreal and our Chairman has been in touch with the CDA Convention Chairman to initiate a co-ordination of activities.

The CDHA Board of Directors will not meet in Montreal but will meet in September 1984 in Central Ontario.

International Symposium

In July 1983, the 9th International Dental Hygiene Symposium will be held in Philadelphia. Attending will be dental hygienists from numerous countries around the world.

It was anticipated that an International Dental Hygienists' Association was to be formed at this meeting. At the present time, financial arrangements suitable to the United States have not been worked out, leaving the future of the IDHA in doubt.

Meeting with the CDA Management Committee

The CDHA has appreciated the opportunity to meet with members of the CDA Management Committee following our annual Board Meetings. We would like to see the practice continue and invite the CDA to join us at our Convention Headquarters in Vancouver.

1983-1984 Executive

President	Mary Pelletier, Moncton, N.B.
President Elect	Laura Mowat, Edmonton, Alberta
Past President	Linda Berry, Toronto, Ontario
Executive Secretary	Carol Worobey 2 Tower Road Nepean, Ontario K2G 2E3

We hope that this report has proved informative and reflects a positive attitude on the part of the CDHA to communicate with the CDA. Your response to the items mentioned and the concept of reporting on a continuous basis would be welcomed.

Respectfully submitted,

Linda Berry,
CDHA President
June, 1983

ADOPTION OF REPORT:

The Report of the Canadian Dental Hygienists' Association received as information by the Board of Governors, with thanks.

DENTAL HYGIENE AS A PART-TIME PROFESSION

A brief submitted to the Commission of Inquiry
Into Part-Time Work

October, 1982

Submitted by: The Canadian Dental Hygienists' Association
c/o 164 Hillcrest Avenue
Hamilton, Ontario
L8P 2X4

Prepared by: Manpower and Utilization Committee
Jenny Thomas, Chairman

SUMMARY

In this brief, it will be shown that dental hygiene is a relatively new profession in which part-time working conditions have always played a significant part. Future projections would also suggest that there will always be a considerable portion of part-time workers.

A factor that should be considered is that some dental hygienists work in a speciality practice and a general practice; or public health and a general practice; or educational institution and a general practice. Thus they are often classified as part-time workers in either one or both positions although actually working a full working week.

Similarly, there are some cases of job-sharing generally reported throughout Canada where one position is shared between two dental hygienists.

This brief is submitted with the intention of bringing the working situation of dental hygienists to the fore and to assist the Commission in its inquiry about part-time workers.

1. INTRODUCTION

All statistics utilized in this brief, unless otherwise stated, have been taken from Demographic and Employment Profile of Dental Hygienists in Canada, 1979, Lewis, D.W., Pierce, M.H., Carsjo, K., and Andrews, P., March, 1981, University of Toronto, Dental Health Care Services, and Characteristics of Dental Hygiene Positions in Canada, 1979, Lewis, D.W., Krievens, T., April, 1982, University of Toronto, Dental Health Care Services. Both of these reports are based on data collected by a National Survey of all dental hygienists in Canada.

This brief is an attempt to show that dental hygiene is a profession which has many part-time workers. Also, that conditions of employment are not regulated and may not therefore always be uniform.

It will outline background information concerning the profession, give statistics concerning dental hygienist distribution in Canada and finally, give statistics relative to the compensation and fringe benefits received.

2. JOB DESCRIPTION

A certified dental hygienist is a professional, oral health educator and clinical operator who, as an auxiliary to the dentist, uses preventive, therapeutic and educational methods for the control of oral diseases. These methods include certain intra-oral procedures as allowed by Provincial legislation.

3. ASSOCIATION

The Canadian Dental Hygienists' Association (C.D.H.A.) is a communications and advisory body with a Board of Directors made up of representatives of all provinces. This Association advises and assists but has little control in the question of employment conditions.

4. EDUCATIONAL ACCREDITATION

The Canadian Dental Association: Council on Dental Education

5. CONTROL OF PRACTICE

Licensure is issued provincially.

6. MANPOWER STATISTICS

6.1 Total number in Canada

The following list shows the number of licenced dental hygienists in Canada. All of these dental hygienists are not necessarily employed.¹

1968 -	544
1969 -	617
1975 -	1566
1976 -	1936
1977 -	2508
1978 -	3200
1979 -	3506

6.2 Sex

Dental hygiene is predominantly a female profession. The surveys indicate that:

79 or 2.8% are males currently active in the profession
2709 or 97.2% are females currently active in the profession.

6.3 Employment Positions

The majority (71.5%) of dental hygiene positions in Canada are in general practice, with the remainder distributed among specialty practice, public health, post-secondary education and school, hospital and military clinics.

6.4 Number of Workplaces

See TABLE I

TABLE I
NUMBER OF DENTAL HYGIENE WORKPLACES BY PROVINCE OF WORKPLACE - ACTIVE DENTAL HYGIENISTS

Workplace Province	Number of Workplaces										Total No. Work- places	Mean No. Work- places
	1	2	3	4	5	6	7	8	9	10		
n	n	n	n	n	n	n	n	n	n	n		
z	z	z	z	z	z	z	z	z	z	z		
1876	81.5	390	16.9	33	1.4	1	0.1	1	0.1	1	2764	1.20
CANADA												
Newfoundland	11	91.7	1	8.3	-	-	-	-	-	-	13	1.08
Prince Edward Island	12	92.3	1	7.7	-	-	-	-	-	-	14	1.08
Nova Scotia	68	85.0	12	15.0	-	-	-	-	-	-	92	1.15
New Brunswick	29	85.3	3	8.8	1	2.9	-	-	-	1	43	1.26
Quebec	357	94.9	18	4.8	1	0.3	-	-	-	-	396	1.05
Ontario	844	75.1	259	23.0	20	1.8	1	0.1	-	-	1426	1.27
Manitoba	96	90.6	10	9.4	-	-	-	-	-	-	116	1.09
Saskatchewan	33	94.3	2	5.7	-	-	-	-	-	-	37	1.06
Alberta	218	86.5	33	13.1	1	0.4	-	-	-	-	287	1.14
British Columbia	206	77.2	51	19.1	10	3.7	-	-	-	-	338	1.27
Yukon & N.W.T.	2	100.0	-	-	-	-	-	-	-	-	2	1.00

6.5 Workplace Location

The distribution of dental hygienists throughout Canada is uneven. Ontario has by far the greatest number of graduates per year and employment workplaces.

2788 persons employed in dental hygiene in Canada
1124 persons employed in dental hygiene in Ontario
376 persons employed in dental hygiene in Quebec (2nd largest)

6.6 Graduation

The supply of dental hygienists in Canada has increased rapidly over the course of the last 4-5 years, mainly due to the opening of the Community College programs in Ontario and Quebec. This is shown in the following list of the number of graduates per year in Canada.¹

1968 - 86 graduates
1969 - 87 graduates
1975 - 304 graduates
1976 - 349 graduates
1977 - 472 graduates
1978 - 524 graduates
1979 - 443 graduates

6.7 Hours worked per week

See TABLE II and TABLE III

The amount of time devoted to dental hygiene practice declines as the number of years since graduation increases.

1978 & 1979 graduates average 35.3 & 34.2 hours per week respectively
1974 & 1975 graduates average 33.9 & 33.6 hours per week respectively
1968 & 1969 graduates average 23.5 & 29.4 hours per week respectively
1950 - 1959 graduates average 23.3 hours per week

Of the dental hygienists working in Ontario, nearly 80% have had no periods of unemployment since graduation. It is being suggested that many of the dental hygienists surveyed in 1979 had not begun the inevitable decline in the number of hours worked.

Thus, future projections of the numbers of hours worked may be less than indicated by the present statistics. TABLE II indicates that the average number of hours worked per week by active dental hygienists in Canada is 31.6.

TABLE II
AVERAGE HOURS WORKED PER WEEK BY ACTIVE DENTAL HYGIENISTS ACCORDING
TO (THEIR) YEAR OF GRADUATION AND WORKPLACE/RESIDENCE PROVINCE

Year Graduated	Province											Yukon & N.W.T.
	Canada	Nfld.	P.E.I.	N.S.	N.B.	Que.	Ont.	Man.	Sask.	Alta.	B.C.	
TOTAL	31.6	26.4	36.3	35.4	33.0	32.0	30.7	34.5	31.1	30.8	29.7	27.5
1979	34.2	-	-	37.3	34.2	32.5	34.4	35.5	32.0	35.0	32.7	-
1978	35.3	30.0	42.0	38.4	33.4	31.6	33.8	37.8	-	35.0	35.5	-
1977	35.0	-	-	38.6	37.0	32.4	32.9	39.1	35.0	34.1	30.8	-
1976	32.0	21.3	38.5	33.1	30.0	32.2	33.3	35.7	31.0	31.4	33.4	-
1975	33.6	-	38.0	37.5	-	32.9	29.3	33.4	35.4	31.9	30.6	-
1974	32.9	35.0	37.0	27.3	38.3	32.5	30.7	32.4	35.8	31.0	28.8	-
1973	31.9	28.2	-	37.6	41.0	-	30.2	28.5	26.8	30.6	32.2	-
1972	30.4	-	37.0	30.0	21.5	-	30.2	31.4	40.0	24.6	28.2	-
1971	27.5	-	-	25.3	38.5	32.0	28.2	23.0	16.0	29.0	27.7	-
1970	27.3	-	-	37.5	27.0	23.0	24.1	29.3	29.4	24.3	24.1	-
1969	29.4	-	-	37.4	-	-	18.2	35.0	34.5	29.1	27.4	24.0
1968	23.5	-	25.5	29.0	-	-	24.0	32.0	12.0	18.1	24.2	-
1967	26.4	-	-	34.0	32.0	-	23.5	27.5	-	20.0	21.1	-
1966	29.7	-	-	-	-	-	23.8	33.8	-	33.8	26.3	31.0
1965	25.9	-	-	33.5	-	23.0	20.7	-	24.0	30.3	23.8	-
1964	27.0	-	-	-	-	40.0	22.4	-	-	22.7	22.7	-
1963	24.2	-	-	-	-	19.7	21.0	-	-	24.9	31.0	-
1962	20.4	-	-	-	-	-	24.7	-	-	16.0	-	-
1961	39.0	-	-	-	-	-	39.0	-	-	-	-	-
1960	27.4	-	-	-	-	-	33.7	-	-	-	21.0	-
1950-59	23.3	12.0	35.0	37.2	-	-	21.7	45.0	35.0	23.0	27.8	-
1940-49	29.0	-	-	36.0	-	16.0	-	-	-	-	35.0	-
<1940	15.0	-	-	-	15.0	-	-	-	-	-	-	-

TABLE III

DISTRIBUTION OF HOURS WORKED PER WEEK BY ACTIVE DENTAL
HYGIENISTS ACCORDING TO YEAR OF GRADUATION

Year of Dental Hygiene Graduation	Hours									
	8 hours or less		9 - 16 Hours		17 - 24 Hours		25 - 34 Hours		35+ Hours	
	n	%	n	%	n	%	n	%	n	%
1979	-	-	8	2.8	14	5.0	94	33.3	166	58.9
1978	1	0.3	10	2.7	19	5.1	126	33.8	217	58.2
1977	4	1.0	12	2.9	26	6.3	141	34.3	228	55.5
1976	4	1.5	12	4.5	15	5.7	90	34.0	144	54.3
1975	6	3.3	6	3.3	15	8.2	66	36.3	89	48.9
1974	2	1.8	7	6.3	11	9.9	45	40.5	46	41.4
1973	5	7.6	9	13.6	6	9.1	20	30.3	46	69.7
1972	5	8.5	8	13.6	12	20.3	28	47.5	36	61.0
1971	3	4.9	9	14.8	10	16.4	13	21.3	26	42.6
1970	6	9.8	12	19.7	7	11.5	18	29.5	18	29.5
1969	3	5.5	14	25.5	11	20.0	10	18.2	17	30.9
1968	5	10.9	14	30.4	5	10.9	10	21.7	12	26.1
1967	8	16.3	13	26.5	6	12.2	5	10.2	17	35.0
1966	4	9.1	7	15.9	9	20.5	10	22.7	14	31.8
1965	5	15.2	8	24.2	5	15.2	5	15.2	10	30.3
1964	7	16.3	12	27.9	3	7.0	12	27.9	9	20.9
1963	4	14.8	6	22.2	5	18.5	7	25.9	5	18.5
1962	1	7.7	3	23.1	3	23.1	3	23.1	3	23.1
1961	-	-	-	-	-	-	1	33.3	2	66.7
1960	-	-	1	50.0	1	50.0	-	-	-	-
1950-59	4	10.2	9	23.1	6	15.4	5	12.8	15	38.5
1940-49	-	-	1	25.0	-	-	-	-	3	75.0
< 1940	-	-	1	100.0	-	-	-	-	-	-

6.8 Days of work per week

See TABLE IV

When the positions themselves are analysed, it can be seen that the mean number of days per position for Canada is 3.5.

TABLE IV

DAYS OF WORK PER WEEK IN ALL DENTAL HYGIENE POSITIONS BY PROVINCE

Province	Days of Work Per Week Per Position				Distribution of Days Per Week Per Position (Accumulated Percentages)					N Positions
	Mean	Median	Minimum	Maximum	<1 day %	<2 days %	<3 days %	<4 days %	>4 days %	
Newfoundland	3.7	4.0	1.0	5.0	7.7	30.8	46.2	46.2	100	13
Prince Edward Island	4.6	4.8	2.0	5.0	0.0	14.3	14.3	14.3	100	14
Nova Scotia	4.2	4.8	1.0	5.0	6.9	11.5	19.5	39.1	100	87
New Brunswick	4.1	4.8	0.5	4.0	7.5	12.5	22.5	35.0	100	40
Quebec	4.2	4.4	0.5	6.0	2.9	9.9	17.2	47.4	100	384
Ontario	3.2	3.0	0.1	7.0	14.1	36.7	52.9	69.0	100	1330
Manitoba	4.1	4.8	0.5	5.0	8.1	15.3	23.4	36.0	100	111
Saskatchewan	4.0	4.6	1.0	7.0	5.6	25.0	27.8	41.7	100	34
Alberta	3.7	4.5	0.5	5.0	7.6	25.4	35.9	49.3	100	276
British Columbia	3.2	3.8	0.5	5.5	16.3	34.0	46.0	77.0	100	300
Yukon & N.W. Terr.	4.0	4.0	2.0	3.0	0.0	0.0	50.0	50.0	100	2
CANADA	3.5	4.0	0.5	7.0	11.2	28.7	41.5	60.9	100	2593

6.9 Overtime work and overtime compensation

See TABLE V

It can be seen that 59% of dental hygienists who work overtime do not receive extra pay.

TABLE V

OVERTIME WORK AND OVERTIME COMPENSATION IN DENTAL HYGIENE POSITIONS BY PROVINCE

Province	Work Overtime?			N Positions	Extra Pay for Overtime?				N Positions
	Regularly %	Occasionally %	Never %		% Yes - Usual rate	% Yes - Higher rate	% No - Time off	% No	
Newfoundland	-	76.9	23.1	13	20.0	-	40.0	40.0	13
Prince Edward Island	16.7	58.3	25.0	13	9.1	-	45.5	45.5	11
Nova Scotia	10.1	59.6	30.3	88	13.1	4.9	26.2	55.7	81
New Brunswick	12.8	51.3	35.9	38	17.4	-	47.8	34.8	23
Quebec	13.4	49.5	37.2	383	24.4	12.4	28.9	34.3	242
Ontario	8.9	46.3	44.9	1366	15.3	4.0	14.2	66.5	752
Manitoba	11.4	46.5	42.1	114	4.6	12.3	18.5	64.6	65
Saskatchewan	11.4	48.6	40.0	35	14.3	-	23.8	61.9	21
Alberta	6.8	58.6	34.6	280	10.6	6.1	29.1	54.2	179
British Columbia	13.8	56.7	29.5	319	12.8	0.9	15.4	70.9	227
Yukon & N.W. Terr.	-	50.0	50.0	2	-	-	-	100.0	1
Canada	10.1	50.1	39.8	2651	15.3	5.3	19.9	59.5	1592

6.10 Compensation

See TABLE VI and TABLE VII

93.9% of dental hygienists receive salary rather than commission or salary plus commission.

TABLE VI
PERCENT DISTRIBUTION OF BASIS OF COMPENSATION FOR
CANADIAN DENTAL HYGIENE POSITIONS BY EMPLOYMENT CATEGORY

Employment Category	Salary	Commission	Salary + Commission	Other	Salary + Other	N Positions
	%	%	%	%	%	
General Practice	92.2	5.1	1.9	0.6	0.2	1926*
Specialty Practice	99.1	0.0	0.9	0.0	0.0	219
G.P. and Specialty	97.8	1.1	0.0	1.1	0.0	93
Public Health	99.6	0.0	0.0	0.0	0.4	231
Post-second. Educ.	97.8	0.0	0.7	1.5	0.0	136
School Clinic	90.9	0.0	0.0	4.5	4.5	22
Hospital Clinic	95.0	0.0	0.0	5.0	0.0	20
Military & Other	97.7	2.3	0.0	0.0	0.0	44
CANADA**	93.9	3.7	1.5	0.6	0.2	2691

* Excludes 1 position stating "not paid".

** Canadian totals include the Yukon and Northwest Territories.

TABLE VII

ESTIMATED MEAN INCOME PER HOUR AND PERCENT DISTRIBUTION OF INCOME PER HOUR FOR CANADIAN DENTAL HYGIENE POSITIONS BY EMPLOYMENT CATEGORY

Employment Category	Mean Income Per Hour*	Percent Distribution of Range of Estimated Mean Income Per Hour* for All Dental Hygiene Positions										Positions
		>0-\$5	>\$5-9	\$9-<10	\$10-<11	\$11-<12	\$12-<14	\$14-19	>\$19	Total		
		%	%	%	%	%	%	%	%			
General Practice	10.91	3.3	28.4	15.6	17.3	12.1	11.0	8.5	4.0	1645		
Specialty Practice	11.48	3.2	24.2	14.5	19.4	9.7	11.3	12.9	4.8	186		
G.P. and Specialty	10.26	3.7	29.3	19.5	17.1	9.8	13.4	4.9	2.4	112		
Public Health	9.30	1.4	51.7	18.0	19.0	3.3	3.3	0.9	2.4	211		
Post-second. Educ.	14.49	0.8	18.6	5.1	9.3	10.2	21.2	19.5	15.2	118		
School Clinic	(16.77)	(5.0)	25.0	10.0	5.0	5.0	15.0	5.0	30.0)	(20)		
Hospital Clinic	(11.89)	(0.0)	64.3	14.3	0.0	0.0	14.3	0.0	7.1)	(14)		
Military & Other	14.14	5.3	31.6	15.8	13.2	2.6	10.5	10.5	10.5	38		
CANADA**	11.08	3.0	29.9	15.3	16.9	10.6	11.0	8.6	4.7	2314		

The hourly income figures exclude those positions not giving the appropriate hours worked, job category and income data. Canadian totals include the Yukon and Northwest Territories.

6.11 Fringe Benefit availability

See TABLE VIII and TABLE IX

It can be seen that there is a significant difference between dental hygienists employed in private practice and those employed in public practice where union assistance is available to aid negotiations. The figures in these two tables apply to the 80% of dental hygienists who have one position. In this case the dental hygienist and the position are identical units of analysis. The remaining 20% who have two or more positions have to be considered separately. These Tables therefore only give an idea of the individual's fringe benefits.

TABLE VIII

FRINGE BENEFIT AVAILABILITY THROUGH PRIVATE AND PUBLIC PRACTICE EMPLOYERS
FOR CANADIAN DENTAL HYGIENISTS HAVING ONLY ONE POSITION

Benefit	Availability Through Employer - Private Practice					Availability Through Employer - Public Practice				
	Available Not Paid	Available Part Paid	Available Wholly Paid	Not Available	N Positions	Available Not Paid	Available Part Paid	Available Wholly Paid	Not Available	N Positions
	£	£	£	£		£	£	£	£	
1. Basic Health Insurance	37.0	5.4	6.2	51.4	1354*	19.2	47.2	24.2	6.0	318*
2. Extended Coverage H. Ins.	40.4	2.1	3.8	53.0	1352*	31.1	37.2	17.6	14.1	312*
3. Long Term Sick. & Disab. Ins.	42.0	3.2	4.1	50.7	1363*	25.5	33.2	25.2	15.7	325*
4. Life Insurance	42.0	2.3	3.6	52.1	1383*	28.7	35.5	25.1	10.7	327*
5. Pension Plan	41.5	0.6	3.2	48.8	1356	28.7	54.2	10.2	6.9	334*
6. V.R.S.P.	43.2	0.4	0.7	55.5	1286	45.1	9.8	6.0	39.1	266
7. Province Licence Fee	45.3	0.4	4.0	30.4	1392**	71.4	1.5	3.6	23.4	329*
8. Malpractice Ins.	35.2	3.2	35.9	25.7	1350	34.9	3.2	33.8	24.1	311
9. Workman's Compens.	37.9	5.4	19.4	37.3	1307	20.7	17.3	47.3	14.7	300
10. Unemployment Ins.	42.7	26.7	15.5	15.2	1357**	41.8	46.4	9.4	2.4	330*
11. Loss of Income Ins.	49.2	1.7	3.1	46.0	1310	43.0	14.1	6.1	34.8	277*
12. Dental Care - Self	16.1	25.0	48.4	10.5	1395	41.1	13.8	17.4	27.6	333
13. Dental Care - Family	39.2	29.0	14.7	17.1	1302*	45.8	13.4	10.3	30.5	321*
14. Dental Convnt. Fees	41.2	17.0	25.3	14.4	1392*	22.6	28.8	40.6	7.9	340*
15. Cont. Educ. Tuition	50.4	15.0	18.8	15.8	1377	24.7	30.4	38.9	6.0	332*
16. Uniform	40.7	12.1	6.7	20.4	1410**	35.2	13.1	26.0	13.7	321*
17. Uniform Laundry	44.7	0.4	2.3	28.4	1381	48.5	3.9	22.3	25.2	309*

*Partly and/or wholly paid benefit is greater than indicated for those working 25 or more hours per week (and less for those working under 25 hours).
**Partly and/or wholly paid benefit is greater than indicated for those working 14 or more hours per week (and less for those working under 14 hours).

TABLE IX

OTHER FRINGE BENEFIT AVAILABILITY THROUGH PRIVATE AND PUBLIC EMPLOYERS FOR CANADIAN DENTAL HYGIENISTS HAVING ONLY ONE POSITION

<u>Benefits</u>	Private Practice		Public Practice	
	<u>% Yes</u>	<u>N Positions</u>	<u>% Yes</u>	<u>N Positions</u>
Paid Sick Leave	57.5*	1425	88.4*	353
Paid Vacation	86.2**	1439	90.1*	352
Paid Statutory Holidays	75.9*	1440	91.8*	354
Other Paid Holidays	30.3*	1418	37.0*	347
Maternity Leave & Return	89.8	585	97.3	298
Travel Compensation for Dental Hyg. Business	24.6	1251	81.9**	323
Time Off Permitted for Conventions & Cont. Educ.	55.3 (no pay) 37.8 (paid)*	1407	16.4 (no pay) 80.7 (paid)*	348

* Percent 'yes' is much higher than indicated for those working 25 or more hours per week (and lower for those working less than 25 hours).

** Percent 'yes' is much higher than indicated for those working 16 or more hours per week (and lower for those working less than 16 hours).

We hope that the information contained in this submission has been of some assistance to the commission in its investigation.

CANADIAN FUND FOR DENTAL EDUCATION

REPORT OF THE CANADIAN FUND FOR DENTAL EDUCATION
TO THE 1983 ANNUAL BOARD OF GOVERNORS

1983 ANNUAL MEETING

1. Since reporting to your Board's interim meeting in March of this year, CFDE held its annual meeting on April 25-26, and it is my pleasure to provide you with detailed information on the decisions made and discussions held at that time.
2. It was the first meeting for me as Chairman and I am pleased to say that everyone present worked hard for the benefit of our profession. All Trustees and staff members were in attendance and a special welcome was extended to our new Trustees from Ontario and the Atlantic Provinces, Drs. Golden and Barrett.
3. The minutes of last year's Board of Trustees meeting and Review & Management Committee meeting were approved as distributed.

AUDITORS

4. The Trustees accepted and approved the auditors' report and financial statements for the year ended December 31, 1982, and the firm of Thorne Riddell was appointed auditors to serve until the next annual Board meeting.

PROPOSED FLUORIDE PROGRAM / HEALTH SCREENING PROGRAM

5. In his September 1982 report to the CDA Board of Governors, Dr. Guest commented at length on the above programs. Both matters were again on the agenda for this year's CFDE Board meeting.
6. It will be recalled that CFDE's proposed 1981 fluoridation program was delayed due to a somewhat similar program being considered by CDA. No additional information was available at the meeting re CDA's program.
7. With regard to the proposed health screening program at CDA National Conventions, a letter had been received from the CDA Executive Director advising that because of space limitations, the program could not be incorporated at the Vancouver Convention this year. Mr. Drouin stated, however, that the subject will be considered again by the 1985 Convention Committee once it is formed later this year.

FUND RAISING

8. As in 1982, the Trustees authorized the following:
 - an appeal letter to business and industry to be forwarded in the spring;
 - two mailings to the profession
 - (a) a spring mailing reporting on what CFDE is doing in 1983 for the benefit of dentistry, and
 - (b) an appeal letter for funds to be mailed shortly before 'October - CFDE Month';

FUND RAISING (cont'd)

- selective mailing towards the end of the year to previous dentist supporters who have not contributed in the current year.

9. New plans for 1983 are:

- approval was given to Hull Colvey Ltd. to conduct a test telephone solicitation program in the cities of Toronto and Montreal;
- development and promotion of a new CFDE tribute card to be used for births, weddings, anniversaries, congratulations on achievement etc., minimum contribution to be \$10.00;
- development of a campaign kit for local Trustees;
- Trustees are to investigate the feasibility of provincial lotteries in their jurisdiction;
- CFDE office to investigate costs and feasibility of a national lottery.

ADVISORY COMMITTEE ON FELLOWSHIP SELECTION

10. The Advisory Committee met on April 15 and Chairman, Dr. John E. Speck, attended part of the Fund's annual meeting to present his report to the Trustees.
11. Four applications were received for CFDE's fellowship for an existent university dental teacher sponsored by Warner-Lambert Canada Inc. This year the value of the fellowship was increased to \$2,500 (from \$2,000 in 1982) and the Committee selected the 1983 recipient for the Board's approval.
12. The Advisory Committee reviewed the terms of the above fellowship and decided that the interests of the teaching profession would be better served if the existing clause (the proposed program of study must be defined and well organized to ensure benefit to the individual and his/her dental school, and at a minimum it must be of approximately one month's duration) be changed to:

The proposed program of study must be defined and well organized to ensure benefit to the individual and his/her dental school, and at a minimum it should be of approximately one month's duration. Shorter programs will be considered, however, the award may be prorated.

The Board agreed with the proposal.

13. Three dentists reapplied for CFDE fellowship support and eleven dentists applied for the first time. The Committee recommended that all three reapplicants be awarded half fellowships and that two full fellowships and seven half fellowships be awarded to new applicants.

ADVISORY COMMITTEE ON FELLOWSHIP SELECTION (cont'd)

14. The Committee further recommended that the Henry M. Thornton Fellowship, established by the Trustees last year in recognition of Mr. Thornton's many contributions to dental education and dental health in Canada, be awarded to an applicant from Dalhousie University. This fellowship carries an added value of \$1,000.
15. One half fellowship was recommended for a dental hygienist.
16. All of the above fellowships were approved by the Board of Trustees at a total value of \$61,000.
17. Last year, on the recommendation of the Advisory Committee, the Trustees approved an increase in the value of the Fund's fellowships. This year, the Committee recommended that the fellowships be again increased in value, however, the Trustees did not feel they were in position to approve the recommended new levels.
18. The Advisory Committee recognized that it is becoming increasingly difficult for an applicant to have a legal or strong institutional commitment for full- or half-time teaching/research after training when applying for CFDE assistance. Therefore, the members proposed an addendum to the current fellowship guidelines stating that those without such a commitment are encouraged to apply and that awards may be made depending on the availability of funds. The Board approved the recommendation.
19. The Trustees are fully aware of the important task carried out by the Fund's Advisory Committee and expressed sincere appreciation to Dr. Speck and the members of his Committee for their excellent efforts on behalf of CFDE.

GRANTS APPROVED FOR 1983

20. In addition to the above fellowships, the Trustees were pleased to approve the following grants for payment this year:
21. An unrestricted grant of \$1,500 will again be awarded to the Dean of each of the ten dental schools.
22. A total of \$20,600 has been set aside in support of the Student Table Clinic Program at the CDA Convention and the Students' Conference to be held in Vancouver September 28 - October 1.
23. You will recall from Dr. Guest's report last year that for several years CFDE had offered scholarships for undergraduate dental students totalling \$500 in each of the ten dental schools and that these scholarships were sponsored by Cooper Laboratories. After the Company withdrew its sponsorship, the Trustees decided last year to discontinue the scholarship program and to invite the Deans' suggestions as to different and perhaps more effective ways CFDE could be of help to undergraduate dental students.

GRANTS APPROVED FOR 1983 (cont'd)

24. A number of recommendations were received and you will be pleased to learn that CFDE has doubled its help for undergraduate students in 1983 to \$1,000 per school, or a total of \$10,000. Since the suggestions as to how the Fund could help varied from school to school, the Trustees agreed that the grants should be used as decided by the Deans.
25. A grant of \$8,000 was approved in support of the 1983 Teaching Conference on Practice Management which will be held in Vancouver, September 27-28, under the Chairmanship of Dr. Roger L. Ellis.
26. The income of approximately \$10,000 from the Lorne E. MacLachlan Endowment Fund will again this year be divided equally between the dental faculties at Toronto, Western Ontario, McGill and Dalhousie. In accordance with the terms of the Endowment, the monies are being used to provide financial assistance for teacher education and training in Removable Prosthodontics. A total of \$64,000 (including 1983) has now been distributed as a result of Dr. MacLachlan's generosity.
27. A Symposium entitled "Will basic research influence clinical dentistry in the future?" will be held at the University of Manitoba in November of this year and the Trustees granted an amount of \$4,000 to help finance this meeting on caries and periodontal disease.
28. A grant of \$2,000 was approved in support of the Canadian Dental Hygienists' Association's second annual Dental Hygiene Educators' Conference scheduled for next September.
29. Also an amount of \$2,000 has been set aside for the Ontario Dental Hygienists' Association's educational projects. The cost of this program is underwritten by a Company sponsor.
30. Canada's first children's museum was recently opened in London, Ontario, and the London & District Dental Society will construct a permanent dental display in the museum. The Trustees decided on a grant of \$1,000 in support of the project.
31. You will recall that last year the Trustees allocated a grant to provide scholarships for dental technology students in provinces where programs are recognized by local licensing boards. Details have now been finalized, and commencing this year (and for a minimum period of three years) one scholarship each with a value of \$200 will be offered at George Brown College in Toronto and the Nova Scotia Institute of Technology in Halifax.
32. The aforementioned awards for 1983 total well over \$130,000 and, judging from past experience, additional grants may be made prior to the end of the year.

CANADIAN DENTAL HYGIENISTS' ASSOCIATION /
REPRESENTATION ON CFDE BOARD OF TRUSTEES

33. In a letter dated April 11, 1983, Mrs. Linda Berry, President of the Canadian Dental Hygienists' Association, made a formal request that a dental hygienist be appointed to CFDE's Board of Trustees.
34. The request was considered by the Board and denied.

AD HOC GRANTING PRIORITIES COMMITTEE REPORT

35. As you know, both CDA and ACFD were asked last year for their comments on CFDE's Ad Hoc Granting Priorities Committee report and both organizations complied with the request.
36. At this year's annual meeting the Trustees passed a resolution stating they will continue their strong historic support for teacher training fellowships, research and services to students, but that they accept the new priorities and will broaden the areas of support as recommended by the Ad Hoc Committee in order to provide practical and tangible results for the practitioners' and patients' benefit.

BOARD OF TRUSTEES

37. Dr. J. F. Reid, Mr. T. D. Rutherford and Dr. W. W. Shortill completed their first term of office this year.
38. Both Dr. Reid and Mr. Rutherford agreed to serve for a second three year term.
39. Dr. Shortill indicated that he will resign from the Board since he feels the profession should be represented by a practising dentist. His active participation and wise counsel will be greatly missed. I will provide you with details as to a possible replacement for Dr. Shortill at the meeting in September.
40. Mr. Rutherford was reappointed Vice-Chairman to serve until the 1984 annual meeting of the Fund.

REVIEW & MANAGEMENT COMMITTEE

41. In addition to the Chairman and the Vice-Chairman, Mr. Hubert Drouin and Dr. Sidney Golden were nominated to serve on the Committee for the ensuing year.

APPRECIATION

42. As always, we are most appreciative of the many ways CDA supports the Fund's activities. In particular I would like to thank the Association for its financial assistance and the excellent coverage we receive in the pages of its Journal.

Respectfully submitted,

David K. Peters, D.D.S.
Chairman
CFDE Board of Trustees

June 10, 1983

ADOPTION OF REPORT:

The Report of the Canadian Fund for Dental Education received as information by the Board of Governors, with thanks.

THE ROYAL COLLEGE OF DENTISTS OF CANADA
LE COLLEGE ROYAL DES CHIRURGIENS DENTISTES DU CANADA

REPORT OF THE ROYAL COLLEGE OF DENTISTS OF CANADA
TO THE 1983 ANNUAL BOARD OF GOVERNORS

College activity since our last report in March, 1983 has consisted chiefly of the Membership Examinations to be held in the latter part of June in Toronto, Winnipeg and Vancouver, and preparations for the Symposium and Annual Meeting in Vancouver.

26 candidates have applied to sit the Membership Examination as follows:

Endodontics	4
Oral Pathology	1
Oral and Maxillofacial Surgery	8
Orthodontics	5
Oral Radiology	1
Paedodontics	2
Periodontics	5

At our Convocation to be held in Vancouver in September, 12 Fellowships will be awarded and at least 26 Memberships, plus some additions from those successful in the June examinations.

THE ROYAL COLLEGE OF DENTISTS OF CANADA

At the time of writing, we have been unable to determine if our request for financial support from the Department of National Health and Welfare in support of the Symposium on Periodontal Disease has been granted. Support has been promised by Colgate Palmolive Ltd. and the John O. Butler Company Ltd.

Finally, I would like to thank the Canadian Dental Association for its continued support and co-operation, and extend best wishes on behalf of the College for a very successful Annual Meeting and Convention in Vancouver.

J. H. P. Main,
President

June 17, 1983

ADOPTION OF REPORT:

The Report of the Royal College of Dentists of Canada received as information by the Board of Governors, with thanks.

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